PAGE 1 / 88

Image# 201512169004240229

FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

	or Other Than An		_			Office Use Only	
1. NAME OF T COMMITTEE (in full)	YPE OR PRINT ▼		nple: If typin the lines.	g, type	12FE4M5		
National Association of I	Mutual Insurand	ce Compan	ies PAC				
ADDRESS (number and street)	3601 Vincennes Road	<b>d</b>					
ADDITESS (number and street)	PO Box 68700						
Check if different than previously reported. (ACC)	Indianapolis				IN	46268	-
2. FEC IDENTIFICATION NUM	IBER ▼	CITY 🛦		S	TATE ▲	ZIP CO	DE 🛦
C C00170258		3. IS THIS REPORT	× (N	EW N) <b>OR</b>	AM (A)	ENDED	
4. TYPE OF REPORT (Choose One)	(b) Monthly Report	Feb 20 (M2)	N	May 20 (M5)	Aug	20 (M8)	Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	Due On:	Mar 20 (M3)	J	un 20 (M6)	Sep 2	20 (M9) ×	Dec 20 (M12) (Non-Election Year Only)
April 15		Apr 20 (M4)	J	ul 20 (M7)	Oct 2	20 (M10)	Jan 31 (YE)
Quarterly Report (Q1)  July 15	(c) 12-Day		Primary (12P)		General (	12G)	Runoff (12R)
Quarterly Report (Q2) October 15	Report for		Convention (1	2C)	Special (1	12S)	
Quarterly Report (Q3)  January 31  Year-End Report (YE)		Election on	M   M /	D   D /	YIYIY	in the State o	of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Elector		General (30G	)	Runoff (3	0R)	Special (30S)
Termination Report (TER)		Election on	M = M /	D = D /	YYYY	in the State o	ıf
5. Covering Period 11		2015	through	M M M	30	2015	
I certify that I have examined this	Report and to the b	est of my know	vledge and b	elief it is true	e, correct and	complete.	
Type or Print Name of Treasurer	Mr. Gregg A. Dykstra	J.D.					
Signature of Treasurer Mr. Gre	egg A. Dykstra J.D.	ı	[Electronically	Filed] Da	ate 12	15	2015
NOTE: Submission of false, erroneo	us, or incomplete info	rmation may sub	oject the pers	on signing thi	s Report to th	e penalties of 2	J.S.C. §437g.
Office Use Only						FEC FOR Rev. 12/2	

**SUMMARY PAGE** OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name National Association of Mutual Insurance Companies PAC 2015 30 2015 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 78506.16 January 1, 2015 (b) Cash on Hand at 99544.38 Beginning of Reporting Period..... 505490.93 19863.13 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 119407.51 583997.09 6(a) and 6(c) for Column B)..... 35035.45 499625.03 Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 84372.06 84372.06 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) .....

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

#### For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

### National Association of Mutual Insurance Companies PAC

tributions (other than loans) From: Individuals/Persons Other Than Political Committees	<u>'</u>	
Than Political Committees		
	10982.40	343109.74
(i) Itemized (use Schedule A)	10902.40	343103.74
(ii) Unitemized	938.49	100131.89
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)▶	11920.89	443241.63
Political Party Committees	0.00	0.00
Other Political Committees		
(such as PACs)	7500.00	60000.00
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)	19420.89	503241.63
y Committees	0.00	0.00
oans Received	0.00	0.00
- Denouments Dessived	0.00	0.00
· ·	0.00	0.00
·	438.63	2206.50
ical Committees	0.00	0.00
er Federal Receipts		
idends, Interest, etc.)	3.61	42.80
sfers from Non-Federal and Levin Funds		
(from Schedule H3)	0.00	0.00
evin Funds (from Schedule H5)	0.00	0.00
To the control of the		
Total Transfers (add 18(a) and 18(b))	0.00	0.00
	(iii) Unitemized	(ii) Unitemized

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	Total This Period					
21.	Operating Expenditures:  (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		Calendar Year-to-Date				
	(i) Federal Share	0.00	0.00				
	(ii) Non-Federal Share	0.00	0.00				
	(b) Other Federal Operating						
	Expenditures	535.45	6875.03				
	(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	535.45	6875.03				
22.	Transfers to Affiliated/Other Party						
23.	Contributions to	0.00	0.00				
	Federal Candidates/Committees and Other Political Committees	34500.00	451500.00				
24.	Independent Expenditures	0.00	0.00				
25.	(use Schedule E)	0.00	0.00				
	(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00				
26.	Loan Repayments Made	0.00	0.00				
	ì	200	200				
27. 28.	Loans Made Refunds of Contributions To:	0.00	0.00				
	(a) Individuals/Persons Other Than Political Committees	0.00	1250.00				
	(b) Political Party Committees	0.00	0.00				
	(b) Political Party Committees	0.00	7				
	(such as PACs)	0.00	0.00				
	(d) Total Contribution Refunds						
	(add Lines 28(a), (b), and (c))▶	0.00	1250.00				
29.	Other Disbursements	0.00	40000.00				
			7				
30.	Federal Election Activity (2 U.S.C. §431(20)) (a) Allocated Federal Election Activity						
	(from Schedule H6)						
	(i) Federal Share	0.00	0.00				
	(ii) "Levin" Share	0.00	0.00				
	(b) Federal Election Activity Paid Entirely	200	0.00				
	With Federal Funds	0.00	0.00				
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00				
1	Total Disbursements (add Lines 21(c), 22,						
• • •	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	35035.45	499625.03				
12.	Total Federal Disbursements		7				
۰ <b>∠</b> .	(subtract Line 21(a)(ii) and Line 30(a)(ii)						
	from Line 31)	35035.45	499625.03				

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

II. Net Contributions/Operating Expenditures				
3. Total Contributions (other than loans) (from Line 11(d), page 3)	19420.89	503241.63		
1. Total Contribution Refunds (from Line 28(d))	0.00	1250.00		
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	19420.89	501991.63		
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	535.45	6875.03		
7. Offsets to Operating Expenditures (from Line 15, page 3)	438.63	2206.50		
3. Net Operating Expenditures (subtract Line 37 from Line 36)	96.82	4668.53		

### SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: **PAGE** (check only one) X 11a 11b 11c

6 OF 88 Use separate schedule(s) ITEMIZED RECEIPTS for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Ms. Cathy M. Adcock Date of Receipt Mailing Address PO Box 30660 05 2015 11 City Zip Code State Transaction ID: A04A52A66492748BDAC7 Lansing MI 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Regional Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 935.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Todd E. Albert Date of Receipt Mailing Address PO Box 111 11 03 2015 City State Zip Code Transaction ID: A8681FBAC1EEA4FD39F8 OH Bucyrus 44820-0111 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation Ohio Mutual Insurance Company Chief Information Officer Receipt For: Aggregate Year-to-Date ▼ Primary General 690.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Todd E. Albert Date of Receipt Mailing Address PO Box 111 18 2015 City Zip Code State Transaction ID: A9959A45E1FBD4B90A6E OH **Bucyrus** 44820-0111 Amount of Each Receipt this Period FEC ID number of contributing 30.00 С federal political committee. Name of Employer Occupation Chief Information Officer Ohio Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 720.00 Other (specify) 145.00 SUBTOTAL of Receipts This Page (optional).....

- 9

TOTAL This Period (last page this line number only).....

	FOF	R LINE	NU	IMBER	:	PAGE	7	OF	88
Use separate schedule(s)	(che	ck only	or	ne)					
for each category of the Detailed Summary Page		11a		11b		11c	12		
in it is in the		13		14		15	16		_լ

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Thomas Alighieri Date of Receipt Mailing Address 222 Ames St 2015 11 13 City Zip Code State Transaction ID: A0CAD520D9F1D42ABB21 Dedham MA 02026-1850 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Name of Employer Occupation Norfolk & Dedham Mutual Fire Insurance Treasurer Receipt For: Aggregate Year-to-Date ▼ Primary General 480.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Neil Alldredge Date of Receipt Mailing Address PO Box 68700 11 16 2015 City State Zip Code Transaction ID: AC416461C867549D4AFD IN Indianapolis 46268-0700 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation National Association of Mutual Insuran Senior Vice President - State and Poli Receipt For: Aggregate Year-to-Date ▼ Primary General 920.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Richard Alleman Date of Receipt Mailing Address 222 Ames St 13 2015 City Zip Code State Transaction ID: A66A017066A7B4124B1A MA Dedham 02026-1850 Amount of Each Receipt this Period FEC ID number of contributing 20.00 С federal political committee. Name of Employer Occupation Norfolk & Dedham Mutual Fire Insurance Director, Network Admin Receipt For: Aggregate Year-to-Date ▼ Primary General

80.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

360.00

Other (specify)

**Auto-Owners Insurance Company** 

Receipt For:

Use separate schedule(s) for each category of the Detailed Summary Page

F	TOTT EITE HOMBETH					PAGE	8	OF	88
(c	he	ck only							
	X	11a		11b		11c	12		
		13		14		15	16		17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Ms. Diane Allen Date of Receipt Mailing Address 6101 Anacapri Blvd 05 2015 City State Zip Code Transaction ID: ABAAA5037350D40F089E MI Lansing 48917-3968 Amount of Each Receipt this Period FEC ID number of contributing C 70.00 federal political committee. Name of Employer Occupation Vice President-Personnel **Auto-Owners Insurance Company** Receipt For: Aggregate Year-to-Date ▼ Primary General 730.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Rick A. Arens Date of Receipt Mailing Address PO Box 30660 11 05 2015 City State Zip Code Transaction ID: AABF5B75E60C84A5495F MI 48909-8160 Lansing Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Name of Employer Occupation

Primary General  Other (specify) ▼	275.00	
Full Name (Last, First, Middle Initial)  Ms. Laura Grace Ashton  Mailing Address 122 C St NW Ste 540  City Washington  FEC ID number of contributing federal political committee.  Name of Employer  National Association of Mutual Insuran  Receipt For:  Primary General Other (specify)	State Zip Code DC 20001-2102  C  Occupation PAC Director  Aggregate Year-to-Date ▼  315.50	Date of Receipt  11 16 2015  Transaction ID: AABD2C2E4C10F4A6B90  Amount of Each Receipt this Period  20.00
OUDTOTAL of Descripts This Descriptoral		115.00

Underwriting Manager

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

Aggregate Year-to-Date ▼

FOR LINE NUMBER: **PAGE** 9 Use separate schedule(s) (check only one) X 11a 11b 11c

OF

88

for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Ms. Lisa M Ayotte Date of Receipt Mailing Address PO Box 30660 05 2015 11 City Zip Code State Transaction ID: A31DB32BBD0874FD4963 Lansing MI 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 42.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Assistant Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 462.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Michael D. Baker Date of Receipt Mailing Address PO Box 30660 11 05 2015 City State Zip Code Transaction ID: A1F7CFF86FF424B51B16 MI Lansing 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 60.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Regional Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 580.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Erik Barker Date of Receipt Mailing Address PO Box 68700 16 2015 City Zip Code State Transaction ID: ABADE1DE07C2F4DB2B26 IN Indianapolis 46268-0700 Amount of Each Receipt this Period FEC ID number of contributing 9.62 С federal political committee. Name of Employer Occupation National Association of Mutual Insuran Account Manager - Membership & Insuran Receipt For: Aggregate Year-to-Date ▼ Primary General 221.26 Other (specify) 111.62 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 10 OF 88 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Kevin Barnes Date of Receipt Mailing Address PO Box 30660 05 2015 11 City Zip Code State Transaction ID: A558401D407EB470EA33 Lansing MI 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Regional Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 330.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Sara Begley Date of Receipt Mailing Address 3030 N 3rd St 11 19 2015 City State Zip Code Transaction ID: AF4EDB3418E2140FCBFB ΑZ Phoenix 85012-3074 Amount of Each Receipt this Period FEC ID number of contributing 10.42 federal political committee. Name of Employer Occupation CopperPoint Mutual Insurance Company Associate General Counsel Receipt For: Aggregate Year-to-Date ▼ Primary General 218.66 Other (specify) Full Name (Last, First, Middle Initial) c. Chris Belcher Date of Receipt Mailing Address PO Box 618 12 2015 City Zip Code State Transaction ID: A7CFEFB437D494C2DBED MO Columbia 65205-0618 Amount of Each Receipt this Period FEC ID number of contributing 66.66 С federal political committee. Name of Employer Occupation Columbia Mutual Insurance Company Director Receipt For: Aggregate Year-to-Date ▼ Primary General 770.88 Other (specify) 107.08 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

	FOR LINE NUMBER:	PAGE	11 OF	88
Use separate schedule(s)	(check only one)			
for each category of the Detailed Summary Page	X 11a 11b	11c	12	
	13 14	15	ີ <sub>16</sub> Γ	717

Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full)		****
National Association of Mutual I	nsurance Companies PAC	
Full Name (Last, First, Middle Initial)  Mr. John S. Benson		Date of Receipt
Mailing Address 1 Mutual Ave		1.1 06 2015
City Frankenmuth	State Zip Code MI 48787-1000	Transaction ID : A9287651A56EB4D49B47  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	117.00
Name of Employer  Frankenmuth Mutual Insurance Company  Receipt For:  Primary  General  Other (specify)	Occupation Chairman & CEO  Aggregate Year-to-Date ▼  2691.00	
Full Name (Last, First, Middle Initial)  Mr. John S. Benson  Mailing Address 1 Mutual Ave		Date of Receipt
City Frankenmuth  FEC ID number of contributing federal political committee.	State Zip Code MI 48787-1000	11 20 2015  Transaction ID : A50366320A6894924815  Amount of Each Receipt this Period  117.00
Name of Employer Frankenmuth Mutual Insurance Company Receipt For:  Primary General Other (specify) ▼	Occupation Chairman & CEO  Aggregate Year-to-Date ▼  2808.00	
Full Name (Last, First, Middle Initial)  Mr. Jake Black  Mailing Address PO Box 968  City  Concordia	State Zip Code MO 64020-0968	Date of Receipt    M
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 50.00
Name of Employer  CFM Insurance, Inc.  Receipt For:  Primary General Other (specify)	Occupation President  Aggregate Year-to-Date ▼  450.00	
SUBTOTAL of Receipts This Page (optional)		284.00
TOTAL This Period (last page this line number of	<u>^_</u>	

	FOF	R LINE	NU	IMBER	:	PAGE	•	12 OF	=	88
Use separate schedule(s)	(che	ck only	or	ne)						
for each category of the Detailed Summary Page	×	11a		11b		11c		12		
		13		14		15		16		17

	Statements may not be sold or used by any pers e name and address of any political committee to	
NAME OF COMMITTEE (In Full)  National Association of Mutual	Insurance Companies PAC	
Full Name (Last, First, Middle Initial)  Mr. Don W. Blackwell  Mailing Address 2005 Market St  Ste 1200  City  Philadelphia  FEC ID number of contributing federal political committee.  Name of Employer  Indiana Lumbermens Mutual Insurance Co  Receipt For:  Primary  General  Other (specify)   Full Name (Last, First, Middle Initial)	State Zip Code PA 19103-7008  C  Occupation Secretary & Treasurer  Aggregate Year-to-Date ▼  440.00	Date of Receipt  11 24 2015  Transaction ID: A6E7B8C3F49AA491B961  Amount of Each Receipt this Period  20.00
Ms. Diane Boucher  Mailing Address PO Box 158  City  McIntosh  FEC ID number of contributing federal political committee.  Name of Employer  KingTown Farmers Mutual Fire Insurance  Receipt For:  Primary General Other (specify)	State Zip Code MN 56556-0158  C  Occupation Manager  Aggregate Year-to-Date ▼  500.00	Date of Receipt  11 24 2015  Transaction ID: A1489D5F9E0A14B5088A  Amount of Each Receipt this Period  500.00
Full Name (Last, First, Middle Initial)  Mr. Alan Brudelie  Mailing Address 118 Downtown Plz  City Fairmont  FEC ID number of contributing federal political committee.  Name of Employer Fairmont Farmers Mutual Insurance Comp Receipt For:  Primary General Other (specify)	State Zip Code MN 56031-1709  C  Occupation Director  Aggregate Year-to-Date ▼  400.00	Date of Receipt  11 09 2015  Transaction ID: A528420B7AFFF47BBAE4  Amount of Each Receipt this Period  200.00
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	720.00
TOTAL This Period (last page this line number	only)	

	FOF	LINE	NU	MBER	:	PAGE	GE 13 OF			88
Use separate schedule(s) for each category of the	(che	ck only	or	ne)						
Detailed Summary Page	X	11a		11b		11c		12		
		13		14		15		16		17

	Statements may not be sold or used by any pers e name and address of any political committee to	
NAME OF COMMITTEE (In Full)  National Association of Mutual	Insurance Companies PAC	
Full Name (Last, First, Middle Initial)  Ms. Tina Brumley  Mailing Address PO Box 30660  City Lansing  FEC ID number of contributing federal political committee.  Name of Employer Auto-Owners Insurance Company  Receipt For:  Primary General Other (specify)	State Zip Code MI 48909-8160  C  Occupation Manager  Aggregate Year-to-Date ▼  275.00	Date of Receipt  11 05 2015  Transaction ID: A3177908D566449C5AC9  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial)  Mr. Stephen Buell  Mailing Address PO Box 30660  City  Lansing  FEC ID number of contributing federal political committee.  Name of Employer  Auto-Owners Insurance Company  Receipt For:  Primary  General  Other (specify)	State Zip Code MI 48909-8160  C  Occupation Assistant Vice President  Aggregate Year-to-Date ▼  326.00	Date of Receipt  11 05 2015  Transaction ID : AC058661B442A41FCA98  Amount of Each Receipt this Period  42.00
Full Name (Last, First, Middle Initial)  Mr. Scott Butler  Mailing Address PO Box 1463  City  Minneapolis  FEC ID number of contributing federal political committee.  Name of Employer  Western National Mutual Insurance Comp  Receipt For:  Primary  General  Other (specify)	State Zip Code MN 55440-1463  C  Occupation Vice President  Aggregate Year-to-Date ▼  260.00	Date of Receipt  11
SUBTOTAL of Receipts This Page (optional)	<u> </u>	97.00
TOTAL This Period (last page this line number	only)	

	FOF	LINE	NU	MBER	:	PAGE		14 OF	-	88	
Use separate schedule(s)	(che	(check only one)									
for each category of the Detailed Summary Page	X	11a		11b		11c		12			
_ common common, cage		13		14		15		16		17	

Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any persename and address of any political committee to	son for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  National Association of Mutual	nsurance Companies PAC	
Full Name (Last, First, Middle Initial)  Mr. Jared Carlson  Mailing Address 101 N Wooster St		Date of Receipt
City	State Zip Code	11 16 2015 Transaction ID : AE121DFE21D9649D2ABF
Algona	IA 50511-2825	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	1
Heartland Mutual Insurance Association	Executive Vice President	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  350.00	
Full Name (Last, First, Middle Initial)  Ms. Ginny Caro  Mailing Address 3030 N 3rd St		Date of Receipt
City	State 7in Code	11 19 2015
City Phoenix	State Zip Code AZ 85012-3074	Transaction ID : AC0400131F89942E79A7
FEC ID number of contributing federal political committee.	C 65012-5074	Amount of Each Receipt this Period  20.83
Name of Employer CopperPoint Mutual Insurance Company	Occupation Vice President of Claims Services	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 770.71	
Full Name (Last, First, Middle Initial)  Ms. Susan Cavanagh		Date of Receipt
Mailing Address PO Box 1463		11 12 2015
City Minneapolis	State         Zip Code           MN         55440-1463	Transaction ID : AFC8FF222046C4796AD1 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer	Occupation	1
Western National Mutual Insurance Comp	Director of Claim Operations	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	260.00	
SUBTOTAL of Receipts This Page (optional)		100.83
TOTAL This Period (last page this line number	only)	

	FOF	R LINE	NU	<b>MBER</b>	PAGE	PAGE 15			88	
Use separate schedule(s)	(che	ck only	or or	ne)						
for each category of the Detailed Summary Page	X	11a		11b		11c		12		
		13		14		15		16		17

	Statements may not be sold or used by any persone name and address of any political committee to	
NAME OF COMMITTEE (In Full)  National Association of Mutual		
Full Name (Last, First, Middle Initial)  Mr. Charles M. Chamness  Mailing Address PO Box 68700		Date of Receipt    M = M / D = D / Y = Y = Y = Y   1,1   16   2015
City Indianapolis  FEC ID number of contributing federal political committee.  Name of Employer  National Association of Mutual Insuran  Receipt For:  Primary General  Other (specify) ▼	State Zip Code IN 46268-0700  C  Occupation President & CEO  Aggregate Year-to-Date ▼  2070.00	Transaction ID : A006D6F9EC59445A2A0D  Amount of Each Receipt this Period  90.00
Full Name (Last, First, Middle Initial)  Mr. John Charamella  Mailing Address PO Box 30660  City  Lansing  FEC ID number of contributing federal political committee.  Name of Employer  Auto-Owners Insurance Company  Receipt For:  Primary  General  Other (specify)	State Zip Code MI 48909-8160  C  Occupation Lawyer  Aggregate Year-to-Date ▼  290.00	Date of Receipt  11 05 2015  Transaction ID: A23CC92650A9A4CF2A82  Amount of Each Receipt this Period  30.00
Full Name (Last, First, Middle Initial)  Mr. Peter Chung  Mailing Address 222 Ames St  City  Dedham  FEC ID number of contributing federal political committee.  Name of Employer  Norfolk & Dedham Mutual Fire Insurance  Receipt For:  Primary  General  Other (specify)	State Zip Code MA 02026-1850  C  Occupation Personal Lines Business Unit Leader  Aggregate Year-to-Date ▼  220.00	Date of Receipt  11 13 2015  Transaction ID: A1DEF18F9E8B94B119FD  Amount of Each Receipt this Period  10.00
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	130.00
TOTAL This Period (last page this line number	r only)	

FOR LINE NUMBER: PAGE 16 OF 88 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Mark Coe Date of Receipt Mailing Address PO Box 111 03 2015 11 City Zip Code State Transaction ID: A5E010D2D36044C168DF OH Bucyrus 44820-0111 Amount of Each Receipt this Period FEC ID number of contributing 39.00 federal political committee. Name of Employer Occupation Ohio Mutual Insurance Company IT Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 936.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Mark Coe Date of Receipt Mailing Address PO Box 111 11 18 2015 City State Zip Code Transaction ID: AA23059BC74264590829 OH **Bucyrus** 44820-0111 Amount of Each Receipt this Period FEC ID number of contributing 39.00 federal political committee. Name of Employer Occupation Ohio Mutual Insurance Company IT Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 975.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Jeff Cole Date of Receipt Mailing Address PO Box 30660 05 2015 City State Zip Code Transaction ID: ACAA2EEBE652F41E6B9C MI Lansing 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 30.00 С federal political committee. Name of Employer Occupation Auto-Owners Insurance Company Regional Vice President - Pittsburgh B Receipt For: Aggregate Year-to-Date ▼ Primary General 290.00 Other (specify) 108.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

	FOF	R LINE	NU	<b>MBER</b>	PAGE	•	17 OF	:	88	
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NAME OF COMMITTEE (In Full)  National Association of Mutual		The second secon
Full Name (Last, First, Middle Initial)  Ms. Lea Coll  Mailing Address PO Box 111		Date of Receipt
City Bucyrus  FEC ID number of contributing federal political committee.  Name of Employer  Ohio Mutual Insurance Company  Receipt For:  Primary General  Other (specify)	State Zip Code OH 44820-0111  C  Occupation General Accounting Manager  Aggregate Year-to-Date ▼  235.35	Transaction ID: A17F8F1B3E1C34223BF4 Amount of Each Receipt this Period  9.62
Full Name (Last, First, Middle Initial)  Ms. Lea Coll  Mailing Address PO Box 111  City  Bucyrus  FEC ID number of contributing federal political committee.  Name of Employer Ohio Mutual Insurance Company  Receipt For:  Primary General Other (specify)	State Zip Code OH 44820-0111  C  Occupation General Accounting Manager  Aggregate Year-to-Date ▼  244.97	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial)  Mr. David N. Cote Esq., AIC  Mailing Address 222 Ames St  City  Dedham  FEC ID number of contributing federal political committee.  Name of Employer  Norfolk & Dedham Mutual Fire Insurance  Receipt For:  Primary  General  Other (specify)	State Zip Code MA 02026-1850  C  Occupation Corporate Secretary, NE Division Manag  Aggregate Year-to-Date ▼  390.00	Date of Receipt  11 13 2015  Transaction ID: A22A5CDA13A7045C19A0  Amount of Each Receipt this Period  20.00
SUBTOTAL of Receipts This Page (optional)	•	39.24
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FEC ID number of contributing

federal political committee.

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Ms. Kathleen Daly Date of Receipt Mailing Address 3030 N 3rd St 2015 City State Zip Code Transaction ID: AC6B350F870E7460692A ΑZ 85012-3074 Phoenix Amount of Each Receipt this Period FEC ID number of contributing C 10.42 federal political committee. Name of Employer Occupation CopperPoint Mutual Insurance Company **Underwriting Manager** Receipt For: Aggregate Year-to-Date ▼ Primary General 218.74 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Jim Danford AIC Date of Receipt Mailing Address PO Box 111 11 03 2015 City State Zip Code Transaction ID: A72705E28490F4F43A63 OH 44820-0111 **Bucyrus** Amount of Each Receipt this Period

Name of Employer Ohio Mutual Insurance Company Receipt For:  ☐ Primary ☐ General Other (specify) ▼	Occupation  Material Damage Manager  Aggregate Year-to-Date ▼  240.00	
C. Full Name (Last, First, Middle Initial) Mr. Jim Danford AIC  Mailing Address PO Box 111		Date of Receipt  11 18 2015
City Bucyrus  FEC ID number of contributing federal political committee.	State Zip Code OH 44820-0111	Transaction ID : AA5FEB5F021574B8C9E0  Amount of Each Receipt this Period  10.00
Name of Employer  Ohio Mutual Insurance Company Receipt For:  □ Primary □ General □ Other (specify) ▼	Occupation  Material Damage Manager  Aggregate Year-to-Date ▼  250.00	
OUDTOTAL of Descripts This Descripts		30.42

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10.00

	FOR	LINE	NU	MBER	:	PAGE		19 OF	:	88	
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Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.			
NAME OF COMMITTEE (In Full)  National Association of Mutual I	nsurance Companies PAC				
Full Name (Last, First, Middle Initial)  A. Mr. Paul Davis  Mailing Address PO Box 6927	ul Davis				
Mailing Address PO Box 6927		11 05 7 2015			
City Richmond	State Zip Code VA 23230-0927	Transaction ID: A07561786CCA1480DB48  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	25.00			
Name of Employer  Mutual Assurance Society of Virginia	Occupation Vice President - Claims				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 271.00				
Full Name (Last, First, Middle Initial)  Mr. Anthony O. Dean  Mailing Address Bo By 19999		Date of Receipt			
Mailing Address PO Box 30660		11 05 7 2015			
City Lansing	State Zip Code MI 48909-8160	Transaction ID: A3D5A4F96AC10499A90A  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	20.00			
Name of Employer Auto-Owners Insurance Company	Occupation Assistant Vice President				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  220.00				
Full Name (Last, First, Middle Initial)  C. Mr. Dan DeArment PFMM		Date of Receipt			
Mailing Address PO Box 646		11 16 2015			
City Bedford	State Zip Code PA 15522-0646	Transaction ID: A76BF6AB665E24FF7B6A  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	350.00			
Name of Employer	Occupation				
Friends Cove Mutual Insurance Company Receipt For:	President/CEO  Aggregate Year-to-Date ▼				
Primary General Other (specify) ▼	3350.00				
SUBTOTAL of Receipts This Page (optional)	<b>•</b>	395.00			
TOTAL This Period (last page this line number of	only)				

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	Statements may not be sold or used by any persone name and address of any political committee to	
NAME OF COMMITTEE (In Full)  National Association of Mutual	Insurance Companies PAC	
Full Name (Last, First, Middle Initial)  Mr. Joseph DeChatelets CPCU  Mailing Address PO Box 5626  City Rockford  FEC ID number of contributing federal political committee.  Name of Employer Rockford Mutual Insurance Company Receipt For:  Primary General Other (specify)	State Zip Code IL 61125-0626  C Occupation President & CEO  Aggregate Year-to-Date ▼  1157.76	Date of Receipt  11 09 2015  Transaction ID: A2C97B0FFE3F7450B884  Amount of Each Receipt this Period  288.48
Full Name (Last, First, Middle Initial)  Mr. David DeGeorge  Mailing Address 3030 N 3rd St  City  Phoenix  FEC ID number of contributing federal political committee.  Name of Employer  CopperPoint Mutual Insurance Company  Receipt For:  Primary  General  Other (specify)	State Zip Code AZ 85012-3074  C  Occupation Application Development Manager  Aggregate Year-to-Date ▼  437.43	Date of Receipt  11 19 2015  Transaction ID : A87CE3E48FE75468E896  Amount of Each Receipt this Period  20.83
Full Name (Last, First, Middle Initial)  Mr. Rick DeGraw  Mailing Address 3030 N 3rd St  City Phoenix  FEC ID number of contributing federal political committee.  Name of Employer  CopperPoint Mutual Insurance Company  Receipt For:  Primary General Other (specify)	State Zip Code AZ 85012-3074  C  Occupation Executive Vice President & Chief Admin  Aggregate Year-to-Date ▼  874.86	Date of Receipt  11 19 2015  Transaction ID: A7F28024CCFFD426BBA0  Amount of Each Receipt this Period  41.66
SUBTOTAL of Receipts This Page (optional)	•	350.97
TOTAL This Period (last page this line numbe	r only)	

	FOR	LINE	NU	MBER	:	PAGE	2	21 OF	88
Use separate schedule(s)	(che	ck only	or	ne)					
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Any information copied from such Reports and a or for commercial purposes, other than using the	Statements may not be sold or used by any perse name and address of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  National Association of Mutual	Insurance Companies PAC	
Full Name (Last, First, Middle Initial)  Mr. Timothy J. Del Grande  Mailing Address 222 Ames St		Date of Receipt
City	State Zip Code	11 13 2015 Transaction ID : A260A61F71A8F4C2AB4C
Dedham	MA 02026-1850	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	10.00
Name of Employer	Occupation	
Norfolk & Dedham Mutual Fire Insurance	Director	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  240.00	
Full Name (Last, First, Middle Initial)  Mr. Robert Detlefsen PhD		Date of Receipt
Mailing Address PO Box 68700		M = M / D = D / Y = Y = Y = Y
City	State Zip Code	11 16 2015 Transaction ID : AE3A421D30837413E8EC
Indianapolis	IN 46268-0700	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	43.48
Name of Employer	Occupation	
National Association of Mutual Insuran	Vice President - Public Policy	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.04	
Full Name (Last, First, Middle Initial)	1	But d Busin
Ms. Michele Devore  Mailing Address PO Box 618		Date of Receipt  11 12 2015
City	State Zip Code	Transaction ID: A8D0FC42F083645AFBFD
Columbia	MO 65205-0618	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer	Occupation	
Columbia Mutual Insurance Company	MO Branch Marketing Manager	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	260.00	
SUBTOTAL of Receipts This Page (optional)		73.48
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 22 OF 88 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Charles W. Drier Date of Receipt Mailing Address PO Box 3337 05 2015 11 City Zip Code State Transaction ID: A253F3EAB223F4E029D6 Peoria IL 61612-3337 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Regional Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 850.03 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Randall K. Druvenga PFMM Date of Receipt Mailing Address PO Box 385 11 09 2015 City State Zip Code Transaction ID: AEE692D254EC446728B3 IΑ Denver 50622-0385 Amount of Each Receipt this Period FEC ID number of contributing 125.00 federal political committee. Name of Employer Occupation First Maxfield Mutual Insurance Associ President Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Gregg A. Dykstra J.D. Date of Receipt Mailing Address 3601 Vincennes Rd 16 2015 City Zip Code State Transaction ID: ADD0CBB03832945328C1 IN Indianapolis 46268-1154 Amount of Each Receipt this Period FEC ID number of contributing 96.16 С federal political committee. Name of Employer Occupation **Chief Operating Officer** National Association of Mutual Insuran Receipt For: Aggregate Year-to-Date ▼ Primary General 2211.68 Other (specify) 304.49 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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	Statements may not be sold or used by any persole name and address of any political committee to	
NAME OF COMMITTEE (In Full)		
National Association of Mutual	Insurance Companies PAC	
Full Name (Last, First, Middle Initial)  A. Mr. Fred A. Edmond Jr.		Date of Receipt
Mailing Address 1 Mutual Ave		11 06 2015
City	State Zip Code	Transaction ID : A97065CE8276C4503A83
Frankenmuth	MI 48787-1000	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	77.00
Name of Employer	Occupation	
Frankenmuth Mutual Insurance Company	President & COO	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	00 0	
Other (specify) ▼	1771.00	
Full Name (Last, First, Middle Initial)  Mr. Fred A. Edmond Jr.		Date of Receipt
Mailing Address 1 Mutual Ave		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	11 20 2015 Transaction ID : A00AA9B74C21D4976831
Frankenmuth	MI 48787-1000	Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.	C	77.00
Name of Employer	Occupation	
Frankenmuth Mutual Insurance Company	President & COO	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	00 0	
Other (specify) ▼	1848.00	
Full Name (Last, First, Middle Initial)  Mr. Andrew M. Eriksen		Date of Receipt
Mailing Address PO Box 30660		M = M / D = D / Y = Y = Y
City	State 7th Order	11 05 2015
City Lansing	State Zip Code MI 48909-8160	Transaction ID : A0B79A613A59C4CA49B3
		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	
Auto-Owners Insurance Company	Assistant Vice President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1100.00	
SURTOTAL of Possints This Poss (antique)		254.00
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	Statements may not be sold or used by any pers re name and address of any political committee to	
NAME OF COMMITTEE (In Full)		
National Association of Mutual	Insurance Companies PAC	
Full Name (Last, First, Middle Initial)  Mr. Keith Escue		Date of Receipt
Mailing Address 703 W Poplar St		11 24 2015
City	State Zip Code	Transaction ID : AF7FAD2FBD5B24E3593A
Rogers	AR 72756-4443	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer	Occupation	
Farmers Protective Mutual Insurance Co	Director	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	275.00	
Full Name (Last, First, Middle Initial)  Mr. Michael L. Faron CPCU		Date of Receipt
Mailing Address 222 Ames St		11 13 2015
City	State Zip Code	Transaction ID : A94E4793C37284E15B56
Dedham	MA 02026-1850	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer	Occupation	1
Norfolk & Dedham Mutual Fire Insurance	Business Unit Leader	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	1240.00	
Full Name (Last, First, Middle Initial)  C. Mr. Stephan Firko		Date of Receipt
Mailing Address 2005 Market St		11 24 2015
Ste 1200 City	State Zip Code	Transaction ID : ACE4D536906A942F2A54
Philadelphia	PA 19103-7008	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	12.50
Name of Employer	Occupation	1
Pennsylvania Lumbermens Mutual Insuran	Vice President	
Receipt For:	Aggregate Year-to-Date ▼	]
Primary General Other (specify) ▼	275.00	
SUBTOTAL of Receipts This Page (optional)		77.50
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	FOR	LINE	NU	MBER	:	PAGE	2	25 OF	-	88
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Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any persone name and address of any political committee to	oson for the purpose of soliciting contributions osolicit contributions from such committee.
NAME OF COMMITTEE (In Full)  National Association of Mutual	Insurance Companies PAC	
Full Name (Last, First, Middle Initial)  Ms. Gayle Fisher  Mailing Address PO Box 30660  City Lansing  FEC ID number of contributing federal political committee.  Name of Employer Auto-Owners Insurance Company  Receipt For:  Primary  Other (specify)   This is a first at the latter to the company.	State Zip Code MI 48909-8160  C  Occupation Assistant Vice President-Life Operatio  Aggregate Year-to-Date ▼  935.00	Date of Receipt  11 05 2015  Transaction ID: A023189163CA245CDA51  Amount of Each Receipt this Period  85.00
Full Name (Last, First, Middle Initial)  Mr. Brad Fortner PFMM, FMDC  Mailing Address 703 W Poplar St  City  Rogers  FEC ID number of contributing federal political committee.  Name of Employer  Farmers Protective Mutual Insurance Co  Receipt For:  Primary  Other (specify)   Other (specify)	State Zip Code AR 72756-4443  C  Occupation Chief Operations Officer/Secretary  Aggregate Year-to-Date ▼  1100.00	Date of Receipt  11 24 2015  Transaction ID: AA7BEA2F08DC047EE9AD  Amount of Each Receipt this Period  100.00
Full Name (Last, First, Middle Initial)  Ms. Bobbie Fox  Mailing Address 3030 N 3rd St  City Phoenix  FEC ID number of contributing federal political committee.  Name of Employer  CopperPoint Mutual Insurance Company  Receipt For:  Primary General Other (specify)	State Zip Code AZ 85012-3074  C  Occupation Attorney  Aggregate Year-to-Date ▼  218.74	Date of Receipt  11 19 2015  Transaction ID: A779F5BFBEC3B4150A62  Amount of Each Receipt this Period  10.42
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	195.42
TOTAL This Period (last page this line numbe	r only)	

FOR LINE NUMBER: PAGE 26 OF 88 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Ms. Bethany Foy Date of Receipt Mailing Address 1725 Hopley Ave 03 2015 11 City Zip Code State Transaction ID: ADA2BC64C844946C0BFF OH Bucyrus 44820-3569 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Name of Employer Occupation United Ohio Insurance Company Business Lines Service Center Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Bethany Foy Date of Receipt Mailing Address 1725 Hopley Ave 11 18 2015 City State Zip Code Transaction ID: A9777E68A38094867A2D OH **Bucyrus** 44820-3569 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Name of Employer Occupation United Ohio Insurance Company Business Lines Service Center Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Mr. Thomas Froman Date of Receipt Mailing Address PO Box 30660 05 2015 City Zip Code State Transaction ID: A5C637EBB186F42C7A3B MI Lansing 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 20.00 С federal political committee. Name of Employer Occupation Auto-Owners Insurance Company Assistant Vice President-Legal Receipt For: Aggregate Year-to-Date ▼ Primary General 220.00 Other (specify) 40.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 27 OF 88 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Benjamin Galloway Date of Receipt Mailing Address PO Box 618 2015 11 City Zip Code State Transaction ID: AC74E89D3A17C4F98BEA MO Columbia 65205-0618 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation Senior Vice President & CRO Columbia Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Randy Gerdes Date of Receipt Mailing Address 3030 N 3rd St 11 19 2015 City State Zip Code Transaction ID: A41E07A049CE54E40BE1 ΑZ Phoenix 85012-3074 Amount of Each Receipt this Period FEC ID number of contributing 20.83 federal political committee. Name of Employer Occupation CopperPoint Mutual Insurance Company Vice President of Strategy Receipt For: Aggregate Year-to-Date ▼ Primary General 437.16 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Rolf H. Gesen Date of Receipt Mailing Address PO Box 900 20 2015 City Zip Code State Transaction ID: A07F436DB96F54EB8940 NH Concord 03302-0900 Amount of Each Receipt this Period FEC ID number of contributing 187.50 С federal political committee. Name of Employer Occupation President/COO Phenix Mutual Fire Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 562.50 Other (specify) 248.33 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

	FOF	R LINE	NU	IMBER	:	PAGE	2	28	OF	88
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	Statements may not be sold or used by any pers e name and address of any political committee to	
NAME OF COMMITTEE (In Full)  National Association of Mutual	Insurance Companies PAC	
Full Name (Last, First, Middle Initial)  Mr. Bryan Gilleland  Mailing Address 1 Mutual Ave  City Frankenmuth  FEC ID number of contributing federal political committee.  Name of Employer Frankenmuth Mutual Insurance Company  Receipt For:  Primary General Other (specify)	State Zip Code MI 48787-1000  C  Occupation Senior Vice President  Aggregate Year-to-Date ▼  884.81	Date of Receipt  11 06 2015  Transaction ID : AE58AA0BDFF8949448A8  Amount of Each Receipt this Period  38.47
Full Name (Last, First, Middle Initial)  Mr. Bryan Gilleland  Mailing Address 1 Mutual Ave  City Frankenmuth  FEC ID number of contributing federal political committee.  Name of Employer Frankenmuth Mutual Insurance Company  Receipt For:  Primary General Other (specify)	State Zip Code MI 48787-1000  C  Occupation Senior Vice President  Aggregate Year-to-Date ▼  923.28	Date of Receipt  11 20 2015  Transaction ID: AA11C019B23824D64827  Amount of Each Receipt this Period  38.47
Full Name (Last, First, Middle Initial)  Ms. Yvette Gonzales  Mailing Address 3030 N 3rd St  City Phoenix  FEC ID number of contributing federal political committee.  Name of Employer  CopperPoint Mutual Insurance Company  Receipt For:  Primary General Other (specify)	State Zip Code AZ 85012-3074  C  Occupation Senior Vice President & CIO  Aggregate Year-to-Date ▼  874.91	Date of Receipt  11 19 2015  Transaction ID: AF5CA490882AD4C2AB1F  Amount of Each Receipt this Period  41.67
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	118.61
TOTAL This Period (last page this line number	only)	

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	d Statements may not be sold or used by any per the name and address of any political committee	
NAME OF COMMITTEE (In Full)  National Association of Mutua	I Insurance Companies PAC	
Full Name (Last, First, Middle Initial)  Mr. Jimi Grande  Mailing Address 122 C St NW  Ste 540  City  Washington  FEC ID number of contributing federal political committee.  Name of Employer  National Association of Mutual Insuran  Receipt For:  Primary  General  Other (specify)	State Zip Code DC 20001-2102  C  Occupation Senior Vice President-Federal and Poli  Aggregate Year-to-Date ▼  2613.72	Date of Receipt  11 16 2015  Transaction ID: AB1FDC6D7F9624BDD9D2  Amount of Each Receipt this Period  113.64
Full Name (Last, First, Middle Initial)  Mr. Jonathan C. Grether MSIM, C  Mailing Address PO Box 370  City  Algona  FEC ID number of contributing federal political committee.  Name of Employer  Pharmacists Mutual Insurance Company  Receipt For:  Primary  General  Other (specify)	State Zip Code IA 50511-0370  C  Occupation COO  Aggregate Year-to-Date ▼  750.00	Date of Receipt  11 09 2015  Transaction ID : AEC4159F771CF41A6900  Amount of Each Receipt this Period  250.00
Full Name (Last, First, Middle Initial)  Mr. David Grove  Mailing Address PO Box 111  City Bucyrus  FEC ID number of contributing federal political committee.  Name of Employer  Ohio Mutual Insurance Company  Receipt For:  Primary General Other (specify)	State Zip Code OH 44820-0111  C  Occupation Assistant Vice President  Aggregate Year-to-Date ▼  480.00	Date of Receipt  11 03 2015  Transaction ID : A29E636BD34DF4A1EA93  Amount of Each Receipt this Period  20.00
SUBTOTAL of Receipts This Page (optional).	•	383.64
TOTAL This Period (last page this line number	er only)	

FOR LINE NUMBER: PAGE 30 OF 88 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. David Grove Date of Receipt Mailing Address PO Box 111 2015 11 18 City Zip Code State Transaction ID: AA0AFCFB86AE045F39C1 OH Bucyrus 44820-0111 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Name of Employer Occupation Ohio Mutual Insurance Company Assistant Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. John Hair Date of Receipt Mailing Address 122 C St NW Ste 540 11 16 2015 City State Zip Code Transaction ID: A6E459A3E9F1549E7AE7 DC Washington 20001-2102 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation National Association of Mutual Insuran Federal Affairs Director Receipt For: Aggregate Year-to-Date ▼ Primary General 920.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Mr. Richard Hall Date of Receipt Mailing Address 2005 Market St 24 2015 Ste 1200 City State Zip Code Transaction ID: A3428CE8238FE4F3282C PΑ Philadelphia 19103-7008 Amount of Each Receipt this Period FEC ID number of contributing 12.50 С federal political committee. Name of Employer Occupation Pennsylvania Lumbermens Mutual Insuran Assistant Vice President-Underwriting Receipt For: Aggregate Year-to-Date ▼ Primary General 275.00 Other (specify) 72.50 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9

FOR LINE NUMBER: PAGE 31 OF 88 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Ms. Alice Hamm Date of Receipt Mailing Address PO Box 30660 05 2015 11 City Zip Code State Transaction ID : AA17119981DA446F387B Lansing MI 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Assistant Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 330.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Mr. William Hanby Date of Receipt Mailing Address PO Box 5626 11 09 2015 City State Zip Code Transaction ID: A90DE7B433E4C45D89FB Rockford IL 61125-0626 Amount of Each Receipt this Period FEC ID number of contributing 57.69 federal political committee. Name of Employer Occupation Rockford Mutual Insurance Company Chief Information Officer Receipt For: Aggregate Year-to-Date ▼ Primary General 451.53 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Fred A. Hannula Date of Receipt Mailing Address PO Box 30660 05 2015 City Zip Code State Transaction ID: A07CEE02B286C4524A00 MI Lansing 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 30.00 С federal political committee. Name of Employer Occupation Auto-Owners Insurance Company Assistant Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 290.00 Other (specify) 117.69 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

	FOR LINE NUMBER:				PAGE	32 OF	88	
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for each category of the Detailed Summary Page	>	11a		11b		11c	12	
		13		14		15	16	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. R. Michael Hartman Date of Receipt Mailing Address 100 Eagle Pointe Dr 05 2015 City State Zip Code Transaction ID: AB35A7EC6D1304E92B1A SC 29229-7314 Columbia Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation Regional Vice President **Auto-Owners Insurance Company** Receipt For: Aggregate Year-to-Date ▼ Primary General 275.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Christopher D. Hartrich FLMI, CPA Date of Receipt Mailing Address PO Box 468 11 06 2015 City State Zip Code Transaction ID : A39FD3B30AB854359915 WI 54957-0468 Neenah Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation

Jewelers Mutual Insurance Company  Receipt For:  Primary General  Other (specify) ▼	Vice President HR/Organizational Devel  Aggregate Year-to-Date ▼  242.00	
Full Name (Last, First, Middle Initial)  C. Mr. Joseph B. Haswell  Mailing Address 222 Ames St		Date of Receipt
City Dedham	State Zip Code MA 02026-1850	11 13 2015  Transaction ID : A304E3D9DEB12447C9F1  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer	Occupation	
Norfolk & Dedham Mutual Fire Insurance	Assistant Division Manager, Casualty C	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
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SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

75.00

	FOF	FOR LINE NUMBER: PAGE 33 OF						:	88	
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Detailed Summary Page	X	11a		11b		11c		12		
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Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any perse name and address of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  National Association of Mutual	Insurance Companies PAC	
Full Name (Last, First, Middle Initial)  Mr. Eugene T. Heaney  Mailing Address 1 Preferred Way  City  New Berlin  FEC ID number of contributing federal political committee.  Name of Employer  Preferred Mutual Insurance Company  Receipt For:  Primary  General  Other (specify)	State Zip Code NY 13411-1800  C  Occupation Vice President of Claims  Aggregate Year-to-Date ▼  520.00	Date of Receipt  11 09 2015  Transaction ID: A8D1DD18E7EE04B1EB3D  Amount of Each Receipt this Period  50.00
Full Name (Last, First, Middle Initial)  Mr. Shane Heeren  Mailing Address PO Box 5626  City Rockford  FEC ID number of contributing federal political committee.  Name of Employer Rockford Mutual Insurance Company  Receipt For:  Primary General Other (specify)	State Zip Code IL 61125-0626  C Occupation Vice President, Marketing & Sales  Aggregate Year-to-Date ▼  350.00	Date of Receipt  11 09 2015  Transaction ID: A02A85D159F134C05A55  Amount of Each Receipt this Period  60.00
Full Name (Last, First, Middle Initial)  Mr. F. Timothy Hegarty Jr., CPCU  Mailing Address 222 Ames St  City  Dedham  FEC ID number of contributing federal political committee.  Name of Employer  Norfolk & Dedham Mutual Fire Insurance  Receipt For:  Primary  General  Other (specify)	State Zip Code MA 02026-1850  C  Occupation President & CEO  Aggregate Year-to-Date ▼  4080.00	Date of Receipt  11 13 2015  Transaction ID: A4D5AA9207DB64E7593E  Amount of Each Receipt this Period  45.00
SUBTOTAL of Receipts This Page (optional)	•	155.00
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 34 OF 88 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Dan Hernandez Date of Receipt Mailing Address 3030 N 3rd St 2015 11 City Zip Code State Transaction ID: A74F3906E4F7A47E6AB8 Phoenix ΑZ 85012-3074 Amount of Each Receipt this Period FEC ID number of contributing 10.42 federal political committee. Name of Employer Occupation Vice President, Small Business Center CopperPoint Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 208.24 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Mike Horvath CPCU Date of Receipt Mailing Address PO Box 111 11 03 2015 City State Zip Code Transaction ID: A28B6571A999643D2A2E OH **Bucyrus** 44820-0111 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Name of Employer Occupation Ohio Mutual Insurance Company Vice President-Human Resources Receipt For: Aggregate Year-to-Date ▼ Primary General 440.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Mike Horvath CPCU Date of Receipt Mailing Address PO Box 111 18 2015 City Zip Code State Transaction ID: A58A22E7816164479A59 OH **Bucyrus** 44820-0111 Amount of Each Receipt this Period FEC ID number of contributing 20.00 С federal political committee. Name of Employer Occupation Vice President-Human Resources Ohio Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 460.00 Other (specify) 50.42 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

	FOR LINE	NUMBER	:   Page	35 OF	88
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for each category of the Detailed Summary Page	X 11a	11b	11c	12	
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	Statements may not be sold or used by any pershe name and address of any political committee to	
NAME OF COMMITTEE (In Full)  National Association of Mutua	I Insurance Companies PAC	
Full Name (Last, First, Middle Initial)  Mr. Timothy R. Hyle CPA  Mailing Address 1 Preferred Way  City  New Berlin  FEC ID number of contributing federal political committee.  Name of Employer  Preferred Mutual Insurance Company  Receipt For:  Primary  Other (specify)   Full Name (Last, First, Middle Initial)	State Zip Code NY 13411-1800  C  Occupation Vice President, Finance & Risk Managem  Aggregate Year-to-Date ▼  575.00	Date of Receipt  11 09 2015  Transaction ID: AD3D85425A69D4735A55  Amount of Each Receipt this Period  50.00
Ms. Sharon K. Irvin  Mailing Address 1725 Hopley Ave  City  Bucyrus  FEC ID number of contributing federal political committee.  Name of Employer  United Ohio Insurance Company  Receipt For:  Primary General  Other (specify) ▼	State Zip Code OH 44820-3569  C  Occupation Manager to the Executive Office  Aggregate Year-to-Date ▼  240.00	Date of Receipt  11 03 2015  Transaction ID : ADBC7B0651D84452B911  Amount of Each Receipt this Period  10.00
Full Name (Last, First, Middle Initial)  Ms. Sharon K. Irvin  Mailing Address 1725 Hopley Ave  City Bucyrus  FEC ID number of contributing federal political committee.  Name of Employer  United Ohio Insurance Company  Receipt For:  Primary General Other (specify)	State Zip Code OH 44820-3569  C  Occupation Manager to the Executive Office  Aggregate Year-to-Date ▼  250.00	Date of Receipt  11 18 2015  Transaction ID: AAE86EFC446A54F24A7F  Amount of Each Receipt this Period  10.00
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	70.00
TOTAL This Period (last page this line number	er only)	

FOR LINE NUMBER: PAGE 36 OF 88 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Ms. Theresa Jakubick Date of Receipt Mailing Address PO Box 111 03 2015 11 City Zip Code State Transaction ID: AAA6BE8AFEB4D4203ADI OH Bucyrus 44820-0111 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Name of Employer Occupation Ohio Mutual Insurance Company Project Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 480.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Theresa Jakubick Date of Receipt Mailing Address PO Box 111 11 18 2015 City State Zip Code Transaction ID: AD847C646400B42AF875 OH **Bucyrus** 44820-0111 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Name of Employer Occupation Ohio Mutual Insurance Company Project Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Mr. Gary Johnson Date of Receipt Mailing Address PO Box 111 03 2015 City Zip Code State Transaction ID: AAF24C4A95D834B628DD OH **Bucyrus** 44820-0111 Amount of Each Receipt this Period FEC ID number of contributing 10.00 С federal political committee. Name of Employer Occupation Ohio Mutual Insurance Company Assistant Vice President, Business Ins Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) 50.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9

	FOR LINE NUMBER:	PAGE 37 OF
Use separate schedule(s)	(check only one)	
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	I Statements may not be sold or used by any per the name and address of any political committee	
NAME OF COMMITTEE (In Full)  National Association of Mutua	I Insurance Companies PAC	
Full Name (Last, First, Middle Initial)  Mr. Gary Johnson  Mailing Address PO Box 111		Date of Receipt
City Bucyrus  FEC ID number of contributing federal political committee.  Name of Employer  Ohio Mutual Insurance Company  Receipt For:  Primary General  Other (specify)	State Zip Code OH 44820-0111  C  Occupation Assistant Vice President, Business Ins  Aggregate Year-to-Date ▼  250.00	Transaction ID: A9D584D50BD764E61A5E  Amount of Each Receipt this Period  10.00
Full Name (Last, First, Middle Initial)  Mr. Jeffrey Jolley  Mailing Address PO Box 111  City Bucyrus  FEC ID number of contributing federal political committee.  Name of Employer United Ohio Insurance Company  Receipt For:  Primary General Other (specify)	State Zip Code OH 44820-0111  C  Occupation Product Manager  Aggregate Year-to-Date ▼  240.00	Date of Receipt  11 03 2015  Transaction ID : A9E206019F6534915B88  Amount of Each Receipt this Period  10.00
Full Name (Last, First, Middle Initial)  Mr. Jeffrey Jolley  Mailing Address PO Box 111  City Bucyrus  FEC ID number of contributing federal political committee.  Name of Employer United Ohio Insurance Company  Receipt For:  Primary General Other (specify)	State Zip Code OH 44820-0111  C  Occupation Product Manager  Aggregate Year-to-Date ▼  250.00	Date of Receipt  11 18 2015  Transaction ID: A2B969D84A2E44D0A947  Amount of Each Receipt this Period  10.00
SUBTOTAL of Receipts This Page (optional).	<b>&gt;</b>	30.00
TOTAL This Period (last page this line number	er only)	

	FOR	LINE	NU	MBER	:	PAGE	 38 OF	=	88
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for each category of the Detailed Summary Page		11a		11b		11c	12		
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Rick Jones Date of Receipt Mailing Address 3030 N 3rd St 2015 19 City Zip Code State Transaction ID: A98DC2971A5EB44D4965 Phoenix ΑZ 85012-3074 Amount of Each Receipt this Period FEC ID number of contributing 41.67 federal political committee. Name of Employer Occupation Executive Vice President, COO & Presid CopperPoint Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 874.99 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Jon Jorgensen Date of Receipt Mailing Address PO Box 30660 11 05 2015 City State Zip Code Transaction ID: A2A7F5033764A446E86D MI 48909-8160 Lansing Amount of Each Receipt this Period FEC ID number of contributing 45.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Assistant Vice President Underwriting Receipt For: Aggregate Year-to-Date ▼

415.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Mr. Thomas Karol Date of Receipt Mailing Address 122 C St NW 16 2015 Ste 540 City Zip Code State Transaction ID: A38BD01908DB246DBA90 DC Washington 20001-2102 Amount of Each Receipt this Period FEC ID number of contributing 45.46 С federal political committee. Name of Employer Occupation Federal Affairs Counsel National Association of Mutual Insuran Receipt For: Aggregate Year-to-Date ▼ Primary General 1045.58 Other (specify)

SUBTOTAL of Receipts This Page (optional)		Ξ	7	Ξ	Ξ			132	.13	
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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

National Association of M	utual Insurance Companies PAC	
Full Name (Last, First, Middle Initial)  A. Ms. Pamela J. Keeney		Date of Receipt
Mailing Address PO Box 68700		1,1 1,6 2015
City Indianapolis	State Zip Code IN 46268-0700	Transaction ID : AA2BA6AE792E449EE9E7  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer  NAMIC Insurance Company, Inc.	Occupation  Vice President - Underwriting & Ins Op	-
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  345.00	
Full Name (Last, First, Middle Initial) <b>B.</b> Ms. Jami Kelly		Date of Receipt
Mailing Address 1 Mutual Ave		1.1 06 2015
City Frankenmuth	State Zip Code MI 48787-1000	Transaction ID : A3F5726ABC0F24AEE98E Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	39.00
Name of Employer Frankenmuth Mutual Insurance Compa	Occupation  Vice President	-
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  897.00	
Full Name (Last, First, Middle Initial)  C. Ms. Jami Kelly		Date of Receipt
Mailing Address 1 Mutual Ave		11 20 _2015
City Frankenmuth	State Zip Code MI 48787-1000	Transaction ID : ACE39C1685DB942079EE  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	39.00
Name of Employer Frankenmuth Mutual Insurance Compa	Occupation  Any Vice President	-
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  936.00	
SUBTOTAL of Receipts This Page (opt	ional)	93.00
TOTAL This Period (last page this line	number only)	

FOR LINE NUMBER: PAGE 40 OF 88 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Mark Kendall Date of Receipt Mailing Address 3030 N 3rd St 2015 11 19 City Zip Code State Transaction ID: A9844B14EA74343C880F Phoenix ΑZ 85012-3074 Amount of Each Receipt this Period FEC ID number of contributing 10.42 federal political committee. Name of Employer Occupation Assistant Chief Counsel CopperPoint Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 218.75 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Patrick D. Kennedy Date of Receipt Mailing Address PO Box 5626 11 09 2015 City State Zip Code Transaction ID: A586009468FC546E1821 Rockford IL 61125-0626 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation Rockford Mutual Insurance Company Casualty Claim Manager and Internal Co Receipt For: Aggregate Year-to-Date ▼ Primary General 220.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Drew A. Klasing Date of Receipt Mailing Address PO Box 30660 05 2015 City Zip Code State Transaction ID: A79E7912ED8DF45178BD MI Lansing 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation Auto-Owners Insurance Company Manager, Home Office Claims Receipt For: Aggregate Year-to-Date ▼ Primary General 510.00 Other (specify) 90.42 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9

FOR LINE NUMBER: PAGE 41 OF 88 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Ms. Joy Klinker Date of Receipt Mailing Address PO Box 68700 2015 11 16 City Zip Code State Transaction ID: A32764395A8E943E8A7B Indianapolis IN 46268-0700 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Name of Employer Occupation HR Coordinator National Association of Mutual Insuran Receipt For: Aggregate Year-to-Date ▼ Primary General 230.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Kraig T. Klopfenstein Date of Receipt Mailing Address PO Box 30660 11 05 2015 City State Zip Code Transaction ID: AB0322A9A009C480E987 MI Lansing 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 75.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Sales/Marketing Receipt For: Aggregate Year-to-Date ▼ Primary General 825.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Andrew Knudsen Date of Receipt Mailing Address 1 Mutual Ave 06 2015 City Zip Code State Transaction ID: A793AD8C1CD834A8CAE0 MI Frankenmuth 48787-1000 Amount of Each Receipt this Period FEC ID number of contributing 38.00 С federal political committee. Name of Employer Occupation Frankenmuth Mutual Insurance Company Vice President, Claims Receipt For: Aggregate Year-to-Date ▼ Primary General 874.00 Other (specify) 123.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 42 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

88

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Andrew Knudsen Date of Receipt Mailing Address 1 Mutual Ave 20 2015 11 City Zip Code State Transaction ID: AC47E644C455C48CF920 Frankenmuth MI 48787-1000 Amount of Each Receipt this Period FEC ID number of contributing 38.00 federal political committee. Name of Employer Occupation Vice President, Claims Frankenmuth Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 912.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Mitch Lawens Date of Receipt Mailing Address PO Box 30660 11 05 2015 City State Zip Code Transaction ID: A33D733786E9948D5B87 MI Lansing 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 35.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Manager - Sales Receipt For: Aggregate Year-to-Date ▼ Primary General 305.00 Other (specify) Full Name (Last, First, Middle Initial) C. Mr. Justin L. Lear PFMM Date of Receipt Mailing Address PO Box 396 09 2015 City Zip Code State Transaction ID: A085F7155E9A0471ABF9 KS Ellinwood 67526-0396 Amount of Each Receipt this Period FEC ID number of contributing 40.00 С federal political committee. Name of Employer Occupation CEO Farmers Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 535.00 Other (specify) 113.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 43 OF 88 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Jim Levine Date of Receipt Mailing Address 3030 N 3rd St 19 2015 11 City Zip Code State Transaction ID: AB06D723E5B7143669CA Phoenix ΑZ 85012-3074 Amount of Each Receipt this Period FEC ID number of contributing 11.00 federal political committee. Name of Employer Occupation CopperPoint Mutual Insurance Company Controller Receipt For: Aggregate Year-to-Date ▼ Primary General 221.56 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Theresa Lewis Date of Receipt Mailing Address PO Box 6927 11 05 2015 City State Zip Code Transaction ID: A1E3C073C4BE74C4EB0F VA Richmond 23230-0927 Amount of Each Receipt this Period FEC ID number of contributing 41.66 federal political committee. Name of Employer Occupation Mutual Assurance Society of Virginia Secretary-Treasurer Receipt For: Aggregate Year-to-Date ▼ Primary General 458.26 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Brian D. Lopata Date of Receipt Mailing Address 1 Preferred Way 09 2015 City Zip Code State Transaction ID: A81CF15B99E7943E4B97 NY New Berlin 13411-1800 Amount of Each Receipt this Period FEC ID number of contributing 80.00 С federal political committee. Name of Employer Occupation SVP, Profit Center Operations & Custom Preferred Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 920.00 Other (specify) 132.66 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9

9

FOR LINE NUMBER: PAGE 44 OF 88 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Jeffrey Lopata Date of Receipt Mailing Address 1 Preferred Way 09 2015 11 City Zip Code State Transaction ID: A5BD78323EBE04C76BDB NY New Berlin 13411-1800 Amount of Each Receipt this Period FEC ID number of contributing 76.94 federal political committee. Name of Employer Occupation Preferred Mutual Insurance Company Manager - Commercial Lines E-Business Receipt For: Aggregate Year-to-Date ▼ Primary General 884.81 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Mike H. Lovelady Date of Receipt Mailing Address PO Box 30660 11 05 2015 City State Zip Code Transaction ID: AF999F1519870421291B MI Lansing 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 22.73 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Assistant Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 248.16 Other (specify) Full Name (Last, First, Middle Initial) c. Stephen B. Lubbering Date of Receipt Mailing Address PO Box 618 12 2015 City Zip Code State Transaction ID: A54C05904BBFB4CFB918 MO Columbia 65205-0618 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation Vice President-Human Resources Columbia Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 395.00 Other (specify) 149.67 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

FOR LINE NUMBER: PAGE 45 OF 88 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Tim Lynch Date of Receipt Mailing Address PO Box 30660 05 2015 11 City Zip Code State Transaction ID: AC7020C56325F4C52A74 Lansing MI 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Assistant Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 483.36 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Laurinda Mackenzie Date of Receipt Mailing Address 1460 Wells St 11 03 2015 City State Zip Code Transaction ID: A454DA65EE50A4F2B809 WA Enumclaw 98022-3003 Amount of Each Receipt this Period FEC ID number of contributing 41.67 federal political committee. Name of Employer Occupation Mutual of Enumclaw Insurance Company Director Receipt For: Aggregate Year-to-Date ▼ Primary General 250.05 Other (specify) Full Name (Last, First, Middle Initial) **c.** Mr. John F. Marazzo Date of Receipt Mailing Address 2005 Market St 24 2015 Ste 1200 City State Zip Code Transaction ID: A16125B0FE6EB47528AE PΑ Philadelphia 19103-7008 Amount of Each Receipt this Period FEC ID number of contributing 20.00 С federal political committee. Name of Employer Occupation Vice President and Treasurer Pennsylvania Lumbermens Mutual Insuran Receipt For: Aggregate Year-to-Date ▼ Primary General 440.00 Other (specify) 111.67 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 -9

FOR LINE NUMBER: PAGE 46 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page

88

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Ms. Diane Marshall Date of Receipt Mailing Address PO Box 30660 05 2015 11 City Zip Code State Transaction ID: A1D2A830044DF401CA8B Lansing MI 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 1100.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Ronald R. Martin II, ASF, A Date of Receipt Mailing Address 1 Preferred Way 11 09 2015 City State Zip Code Transaction ID: A3921447C3FC64B79A37 New Berlin NY 13411-1800 Amount of Each Receipt this Period FEC ID number of contributing 19.24 federal political committee. Name of Employer Occupation Preferred Mutual Insurance Company Vice President - Personal Lines Receipt For: Aggregate Year-to-Date ▼ Primary General 221.26 Other (specify) Full Name (Last, First, Middle Initial) c. Mrs. Stacey Matteson Date of Receipt Mailing Address 1901 Bragaw St 12 2015 Ste 100 City State Zip Code Transaction ID: A5012A85AAA704673917 AK Anchorage 99508-3471 Amount of Each Receipt this Period FEC ID number of contributing 60.00 С federal political committee. Name of Employer Occupation **Umialik Insurance Company** Director of Underwriting Receipt For: Aggregate Year-to-Date ▼ Primary General 520.00 Other (specify) 179.24 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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Frankenmuth  MI 48787-1000  FEC ID number of contributing federal political committee.  Name of Employer Frankenmuth Mutual Insurance Company Receipt For:  Primary General Other (specify) ▼  State Zip Code Frankenmuth Mutual Insurance Company Mailing Address 1 Mutual Ave  City State Zip Code Frankenmuth Mutual Insurance Company Fec ID number of contributing federal political committee.  Primary General Other (specify) ▼  State Zip Code Frankenmuth Mi 48787-1000  FEC ID number of contributing federal political committee.  Aggregate Year-to-Date ▼ Occupation Vice President, IT Receipt For:  Primary General Other (specify) ▼  State Zip Code AZ 85012-3074  Date of Receipt this Period  Date of Receipt  Transaction ID : AA0F207B291164DABA Amount of Each Receipt this Period  Date of Receipt Transaction ID : AA0F207B291164DABA  Amount of Each Receipt this Period  Date of Receipt Transaction ID : AA0F207B291164DABA  Amount of Each Receipt this Period  Transaction ID : A788F602177E64F89A  Amount of Each Receipt this Period  Date of Receipt Transaction ID : A788F602177E64F89A  Amount of Each Receipt this Period  Date of Receipt Transaction ID : A788F602177E64F89A  Amount of Each Receipt this Period  Date of Receipt Transaction ID : A788F602177E64F89A  Amount of Each Receipt Transaction ID : A788F602177E64F89A  Amount of Each Receipt this Period  Date of Receipt Transaction ID : A788F602177E64F89A  Amount of Each Receipt this Period  Date of Receipt Transaction ID : A788F602177E64F89A  Amount of Each Receipt this Period  Transaction ID : A788F602177E64F89A  Amount of Each Receipt this Period  Date of Receipt Transaction ID : A788F602177E64F89A  Amount of Each Receipt this Period		Statements may not be sold or used by any pers e name and address of any political committee to	
A. Mr. Phil McCain  Mailing Address 1 Mutual Ave  City  State Zip Code  Mil 48787-1000  FEC ID number of contributing federal political committee.  Name of Employer  Frankenmuth Mutual Insurance Company  Recept For:  Primary General  City  Primary General  Other (specify) ▼  State Zip Code  Mil 48787-1000  City  State Zip Code  Mil 48787-1000  Date of Receipt  Transaction ID: A6238714/A7504E338I  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: A6238714/A7504E338I  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: A6238714/A7504E338I  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: A6238714/A7504E338I  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: A6238714/A7504E338I  Amount of Each Receipt this Period  Transaction ID: A64728711540A8A  Amount of Each Receipt this Period  Transaction ID: A64728711540A8A  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: A64728711540A8A  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: A64728711540A8A  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: A64728711540A8A  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: A788F8021777E54F89A  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: A788F8021777E54F89A  Amount of Each Receipt this Period  Date of Receipt  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: A788F8021777E54F89A  Amount of Each Receipt this Period  Date of Receipt  Amount of Each Receipt this Period  Date of Receipt  Amount of Each Receipt this Period  Date of Receipt  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: A788F802177E54F89A  Amount of Each Receipt this Period  Date of Receipt  Date of Re		Insurance Companies PAC	
Name of Employer Frankenmuth Mutual Insurance Company Receipt For:    Primary   General   Aggregate Year-to-Date ▼	Mr. Phil McCain  Mailing Address 1 Mutual Ave  City  Frankenmuth	MI 48787-1000	11 06 2015  Transaction ID: A6238741A475D4E33BFE  Amount of Each Receipt this Period
Mr. Phil McCain  Mailing Address 1 Mutual Ave  City Frankenmuth FEC ID number of contributing federal political committee.  Name of Employer Frankenmuth Mutual Insurance Company Receipt For: Primary Other (specify) ▼  State Zip Code Transaction ID: AA0F207B291164DABA Amount of Each Receipt this Period  Aggregate Year-to-Date ▼  Pull Name (Last, First, Middle Initial)  Mailing Address 3030 N 3rd St  City State Zip Code AZ 85012-3074  FEC ID number of contributing federal political committee.  City FEC ID number of contributing federal political committee.  Name of Employer CopperPoint Mutual Insurance Company Receipt For: Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  Occupation Assistant Vice President of Financial Receipt For: Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  Other (specify) ▼  Aggregate Year-to-Date ▼  218.66	Name of Employer  Frankenmuth Mutual Insurance Company  Receipt For:  Primary  General	Occupation Vice President, IT  Aggregate Year-to-Date ▼	30.41
FEC ID number of contributing federal political committee.  Name of Employer Frankenmuth Mutual Insurance Company Receipt For:    Primary   General   Other (specify) ▼	Mr. Phil McCain  Mailing Address 1 Mutual Ave  City		11 20 2015 Transaction ID : AA0F207B291164DABAF6
Full Name (Last, First, Middle Initial)  Mailing Address 3030 N 3rd St  City Phoenix  FEC ID number of contributing federal political committee.  Name of Employer  CopperPoint Mutual Insurance Company  Receipt For: Primary General Other (specify)   Date of Receipt  Mailing Address 3030 N 3rd St  Mailing Address 3030 N 3rd St  Date of Receipt  Mailing Address 3030 N 3rd St  Mailing Address 3030 N 3rd St  Date of Receipt  Mailing Address 3030 N 3rd St  Mailing Address 3030 N 3rd St  Date of Receipt  Amount of Each Receipt this Period  Date of Receipt  Mailing Address 3030 N 3rd St  Date of Receipt  Mailing Address 3030 N 3rd St  Date of Receipt  Mailing Address 3030 N 3rd St  Date of Receipt  Mailing Address 3030 N 3rd St  Date of Receipt  Amount of Each Receipt this Period  Date of Receip	FEC ID number of contributing federal political committee.  Name of Employer Frankenmuth Mutual Insurance Company  Receipt For:  Primary  General	C Occupation Vice President, IT Aggregate Year-to-Date ▼	
Other (specify) ▼ 218.66	Full Name (Last, First, Middle Initial)  Mr. Brent McClean  Mailing Address 3030 N 3rd St  City Phoenix  FEC ID number of contributing federal political committee.  Name of Employer  CopperPoint Mutual Insurance Company	State Zip Code AZ 85012-3074  C  Occupation Assistant Vice President of Financial	11 19 2015  Transaction ID : A7B8F6D2177E64F89A07  Amount of Each Receipt this Period
TOTAL This Period (last page this line number only)	Other (specify) ▼  SUBTOTAL of Receipts This Page (optional)		87.36

FOR LINE NUMBER: PAGE 48 OF 88 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. James McCormack Date of Receipt Mailing Address PO Box 111 2015 11 0.3 City Zip Code State Transaction ID : A6352988272C94DB9BE5 OH Bucyrus 44820-0111 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Name of Employer Occupation Ohio Mutual Insurance Company Assistant Vice President - Information Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. James McCormack Date of Receipt Mailing Address PO Box 111 11 18 2015 City State Zip Code Transaction ID: A92E87B0D46B24D3BA7E OH Bucyrus 44820-0111 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Name of Employer Occupation Ohio Mutual Insurance Company Assistant Vice President - Information Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. S.H. McCullough Date of Receipt Mailing Address PO Box 244017 05 2015 City State Zip Code Transaction ID: A6E3E3334D73B42BF852 AL Montgomery 36124-4017 Amount of Each Receipt this Period FEC ID number of contributing 30.00 С federal political committee. Name of Employer Occupation **RVP - Montgomery Region** Auto-Owners Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 290.00 Other (specify) 50.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9

FOR LINE NUMBER: PAGE 49 OF 88 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Ms. Sherry L. McKenzie AAM, AIS Date of Receipt Mailing Address PO Box 30660 05 2015 11 City Zip Code State Transaction ID: A96D961F1B7FB42D894A Lansing MI 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 75.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Assistant Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 825.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Brian S. McLeod Date of Receipt Mailing Address 1 Mutual Ave 11 06 2015 City State Zip Code Transaction ID: AFD8AC1350A29488AA96 MI Frankenmuth 48787-1000 Amount of Each Receipt this Period FEC ID number of contributing 38.50 federal political committee. Name of Employer Occupation Frankenmuth Mutual Insurance Company Vice President, Secretary & Treasurer Receipt For: Aggregate Year-to-Date ▼ Primary General 885.50 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Brian S. McLeod Date of Receipt Mailing Address 1 Mutual Ave 20 2015 City Zip Code State Transaction ID: A68E0235312D0456287E MI Frankenmuth 48787-1000 Amount of Each Receipt this Period FEC ID number of contributing 38.50 С federal political committee. Name of Employer Occupation Frankenmuth Mutual Insurance Company Vice President, Secretary & Treasurer Receipt For: Aggregate Year-to-Date ▼ Primary General 924.00 Other (specify) 152.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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	d Statements may not be sold or used by any pers the name and address of any political committee to	
NAME OF COMMITTEE (In Full)  National Association of Mutua	al Insurance Companies PAC	
Full Name (Last, First, Middle Initial)  R.F. Mengerink  Mailing Address PO Box 30660  City Lansing  FEC ID number of contributing federal political committee.  Name of Employer  Auto-Owners Insurance Company  Receipt For:  Primary General Other (specify)	State Zip Code MI 48909-8160  C  Occupation AVP Information Systems & Technology  Aggregate Year-to-Date ▼  258.00	Date of Receipt  11 05 2015  Transaction ID: AC6094DDCEA3846F49EB  Amount of Each Receipt this Period  30.00
Full Name (Last, First, Middle Initial)  Mr. Thomas A. Meyers  Mailing Address 250 Main St		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Buffalo  FEC ID number of contributing federal political committee.	State Zip Code NY 14202-4104	Transaction ID : A1B49243C8BA141108B5 Amount of Each Receipt this Period  250.00
Name of Employer  Merchants Mutual Insurance Company  Receipt For:  Primary  General  Other (specify) ▼	Occupation Chief Finance Officer, Vice President  Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial)  Mr. Scott A. Michael  Mailing Address PO Box 30660  City  Lansing  FEC ID number of contributing federal political committee.  Name of Employer  Auto-Owners Insurance Company  Receipt For:  Primary  General  Other (specify)	State Zip Code MI 48909-8160  C  Occupation AVP - Personal Lines Auto  Aggregate Year-to-Date ▼  510.00	Date of Receipt  11 05 2015  Transaction ID: A88AAB6C6875E4C22B8B  Amount of Each Receipt this Period  50.00
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	330.00
TOTAL This Period (last page this line numb	er only)	

FOR LINE NUMBER: PAGE 51 OF 88 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. David Middleton Date of Receipt Mailing Address PO Box 68700 2015 11 16 City Zip Code State Transaction ID: A61C5528FB7124850943 Indianapolis IN 46268-0700 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation Vice President - Finance National Association of Mutual Insuran Receipt For: Aggregate Year-to-Date ▼ Primary General 920.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Laurie Mirchuk Date of Receipt Mailing Address 222 Ames St 11 13 2015 City State Zip Code Transaction ID: AB98DD0A8E73146D9BFF MA Dedham 02026-1850 Amount of Each Receipt this Period FEC ID number of contributing 6.00 federal political committee. Name of Employer Occupation Norfolk & Dedham Mutual Fire Insurance Senior Commercial Lines Underwriter Receipt For: Aggregate Year-to-Date ▼ Primary General 228.00 Other (specify) Full Name (Last, First, Middle Initial) c. Ms. Dona L. Mohr Date of Receipt Mailing Address 1725 Hopley Ave 03 2015 City Zip Code State Transaction ID: AB39C9253DE1D4872BF9 OH **Bucyrus** 44820-3569 Amount of Each Receipt this Period FEC ID number of contributing 45.00 С federal political committee. Name of Employer Occupation Ohio Mutual Insurance Company Assistant Vice President-Quality Servi Receipt For: Aggregate Year-to-Date ▼ Primary General 1080.00 Other (specify) 91.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9

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	Statements may not be sold or used by any persecutive name and address of any political committee t	
NAME OF COMMITTEE (In Full)  National Association of Mutual	Insurance Companies PAC	
Full Name (Last, First, Middle Initial)  Ms. Dona L. Mohr  Mailing Address 1725 Hopley Ave  City	State Zip Code	Date of Receipt  11 18 2015  Transaction ID : A85705D1A98F74FD287C
Bucyrus  FEC ID number of contributing federal political committee.  Name of Employer  Ohio Mutual Insurance Company  Receipt For:  Primary General  Other (specify)	OH 44820-3569  C  Occupation Assistant Vice President-Quality Servi  Aggregate Year-to-Date ▼  1125.00	Amount of Each Receipt this Period 45.00
Full Name (Last, First, Middle Initial)  Ms. Carolyn B. Muller  Mailing Address PO Box 30660  City  Lansing  FEC ID number of contributing federal political committee.  Name of Employer  Auto-Owners Insurance Company  Receipt For:  Primary  General  Other (specify)	State Zip Code MI 48909-8160  C  Occupation Senior Vice President - Claims  Aggregate Year-to-Date ▼  935.00	Date of Receipt  11 05 2015  Transaction ID: A5B42D2EC812547248B0  Amount of Each Receipt this Period  85.00
Full Name (Last, First, Middle Initial)  Mr. Joel P. Murray  Mailing Address 222 Ames St  City Dedham  FEC ID number of contributing federal political committee.  Name of Employer Norfolk & Dedham Mutual Fire Insurance Receipt For: Primary General Other (specify)	State Zip Code MA 02026-1850  C  Occupation Vice President, Personal Lines & Marke  Aggregate Year-to-Date ▼  470.00	Date of Receipt  11 13 2015  Transaction ID: A29DE83C3EE36467C84E  Amount of Each Receipt this Period  20.00
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	150.00
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 53 OF 88 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. William C. Myers Date of Receipt Mailing Address 2005 Market St Ste 1200 2015 11 24 City State Zip Code Transaction ID: AB6D25DE95FB14AD69AD PΑ Philadelphia 19103-7008 Amount of Each Receipt this Period FEC ID number of contributing 12.50 federal political committee. Name of Employer Occupation Pennsylvania Lumbermens Mutual Insuran Director Receipt For: Aggregate Year-to-Date ▼ Primary General 275.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Brent Nelson Date of Receipt Mailing Address 3030 N 3rd St 11 19 2015 City State Zip Code Transaction ID: ACE9A07E5CCA24112BF4 ΑZ Phoenix 85012-3074 Amount of Each Receipt this Period FEC ID number of contributing 20.83 federal political committee. Name of Employer Occupation CopperPoint Mutual Insurance Company Chief Financial Officer & Executive Vi Receipt For: Aggregate Year-to-Date ▼ Primary General 437.43 Other (specify) Full Name (Last, First, Middle Initial) C. Mr. James Northard Date of Receipt Mailing Address PO Box 68700 16 2015 City Zip Code State Transaction ID: AA734F0890FD14635B09 IN Indianapolis 46268-0700 Amount of Each Receipt this Period FEC ID number of contributing 9.62 С federal political committee. Name of Employer Occupation Web Design Specialist National Association of Mutual Insuran Receipt For: Aggregate Year-to-Date ▼ Primary General 221.26 Other (specify) 42.95 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 54 OF 88 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Harry Palmer Date of Receipt Mailing Address 703 W Poplar St 2015 11 24 City Zip Code State Transaction ID: A872D1895DD2D4F97B02 AR Rogers 72756-4443 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Name of Employer Occupation Farmers Protective Mutual Insurance Co Director Receipt For: Aggregate Year-to-Date ▼ Primary General 275.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Helen Pettersen Date of Receipt Mailing Address 222 Ames St 11 13 2015 City State Zip Code Transaction ID: AED35D364AD1647E39BF Dedham MA 02026-1850 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Name of Employer Occupation Norfolk & Dedham Mutual Fire Insurance IT Project Leader Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name (Last, First, Middle Initial) c. Ms. Andrea I. Phillips Date of Receipt Mailing Address PO Box 30660 05 2015 City Zip Code State Transaction ID: ABECD0597CE7C4A9BB13 MI Lansing 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 30.00 С federal political committee. Name of Employer Occupation Auto-Owners Insurance Company Assistant Vice President, Personal Lin Receipt For: Aggregate Year-to-Date ▼ Primary General 290.00 Other (specify) 65.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

	FOF	R LINE	NU	<b>MBER</b>	:	PAGE	:	55 OF	:	88
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	Statements may not be sold or used by any persone name and address of any political committee t	
NAME OF COMMITTEE (In Full)		
igr > National Association of Mutual	Insurance Companies PAC	
Full Name (Last, First, Middle Initial)		T
Mr. Gregory Pianko		Date of Receipt
Mailing Address 2005 Market St		M = M / D = D / Y = Y = Y
Ste 1200		11 24 2015
City	State Zip Code PA 19103-7008	Transaction ID : A9BA5F3B86BF745BEAB2
Philadelphia	1.7 19103-1000	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	12.50
Name of Employer	Occupation	-
Pennsylvania Lumbermens Mutual Insuran	Vice President, Loss Control	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General		
Other (specify) ▼	275.00	
Full Name (Last, First, Middle Initial)		
Mr. Jeffery Pierce		Date of Receipt
Mailing Address PO Box 30660		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	11 05 2015 Transaction ID : A2F459382E69C44FB8F2
Lansing	MI 48909-8160	Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.	C	20.00
Name of Employer	Occupation	-
Auto-Owners Insurance Company	Assistant Vice President-Marketing	
Receipt For:	Aggregate Year-to-Date ▼	]
Primary General		
Other (specify) ▼	220.00	
Full Name (Last, First, Middle Initial)	I.	
Ms. Mary S. Pierce		Date of Receipt
Mailing Address PO Box 30660		11 05 2015
City	State Zip Code	Transaction ID : AAF7786FF804C4009911
Lansing	MI 48909-8160	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.27
Name of Employer	Occupation	-
Auto-Owners Insurance Company	Vice President	
Receipt For:	Aggregate Year-to-Date ▼	]
Primary General		
Other (specify) ▼	666.61	
	<u>I</u>	115.77
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	113.77
TOTAL This Period (last page this line number	r only)	

FOR LINE NUMBER: PAGE 56 OF 88 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Mike Pike Date of Receipt Mailing Address PO Box 30660 05 2015 11 City Zip Code State Transaction ID: A38793C733B43475B91A Lansing MI 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 45.00 federal political committee. Name of Employer Occupation Human Resources Professional **Auto-Owners Insurance Company** Receipt For: Aggregate Year-to-Date ▼ Primary General 415.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Barry Preslaski Date of Receipt Mailing Address PO Box 30660 11 05 2015 City State Zip Code Transaction ID: AC7BACC6CDA91428F9E4 MI Lansing 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 330.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Lee Rademacher Date of Receipt Mailing Address PO Box 30660 05 2015 City Zip Code State Transaction ID: A8B0963DF7FB34FD49E7 MI Lansing 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 30.00 С federal political committee. Name of Employer Occupation Auto-Owners Insurance Company Assistant Vice President-Commercial Li Receipt For: Aggregate Year-to-Date ▼ Primary General 360.00 Other (specify) 105.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

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	Statements may not be sold or used by any pers e name and address of any political committee to	
NAME OF COMMITTEE (In Full)  National Association of Mutual	Insurance Companies PAC	
Full Name (Last, First, Middle Initial)  Ms. Liz Reynolds CPCU, API  Mailing Address PO Box 68700  City Indianapolis  FEC ID number of contributing federal political committee.  Name of Employer National Association of Mutual Insuran  Receipt For:  Primary General Other (specify)  Full Name (Last, First, Middle Initial)	State Zip Code IN 46268-0700  C  Occupation Director - State Affairs, Southeast Re  Aggregate Year-to-Date ▼  230.00	Date of Receipt  11 16 2015  Transaction ID: A44EDA8806EBC4BE9859  Amount of Each Receipt this Period  10.00
Mr. Jonathan R. Riekse  Mailing Address PO Box 30660  City  Lansing  FEC ID number of contributing federal political committee.  Name of Employer  Auto-Owners Insurance Company  Receipt For:  Primary General Other (specify)	State Zip Code MI 48909-8160  C  Occupation Senior Vice President, Personal Lines  Aggregate Year-to-Date ▼  916.67	Date of Receipt  11 05 2015  Transaction ID: A39681FE4CB1E4F959F1  Amount of Each Receipt this Period  83.33
Full Name (Last, First, Middle Initial)  Mr. Clarence Roach  Mailing Address 703 W Poplar St  City Rogers  FEC ID number of contributing federal political committee.  Name of Employer Farmers Protective Mutual Insurance Co Receipt For:  Primary General Other (specify)	State Zip Code AR 72756-4443  C  Occupation Vice President  Aggregate Year-to-Date ▼  275.00	Date of Receipt  11 24 2015  Transaction ID: A8147B104D7E74D67A11  Amount of Each Receipt this Period  25.00
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	118.33
TOTAL This Period (last page this line number	only)	

	FOF	R LINE	NU	MBER	:	PAGE	58	OF	:	88
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		13		14		15	16	,		17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Jonathan Rodgers Date of Receipt Mailing Address PO Box 68700 2015 11 City Zip Code State Transaction ID: A22F82DAB35AA43688DF Indianapolis IN 46268-0700 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Name of Employer Occupation National Association of Mutual Insuran Accounting Regulation Analyst Receipt For: Aggregate Year-to-Date ▼ Primary General 230.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Ed Roesch Date of Receipt Mailing Address PO Box 68700 11 16 2015 City State Zip Code Transaction ID: A4AF76623E6D84CF2B1C IN Indianapolis 46268-0700 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Name of Employer Occupation NAMIC Insurance Company, Inc. Director, Claims Department Receipt For: Aggregate Year-to-Date ▼ Primary General 230.00 Other (specify)

Full Name (Last, First, Middle Initial) c. Mr. Malcolm Rowland AIC, CPCU, Date of Receipt Mailing Address PO Box 5626 09 2015 City State Zip Code Transaction ID: AA71323B43B9D4099970 IL Rockford 61125-0626 Amount of Each Receipt this Period FEC ID number of contributing 57.69 С federal political committee. Name of Employer Occupation Vice President-Reinsurance Rockford Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 211.53 Other (specify)

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

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	FOR LINE NUMBER:	PAGE	59 OF	88
Use separate schedule(s)	(check only one)			
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	Statements may not be sold or used by any person ename and address of any political committee to	
NAME OF COMMITTEE (In Full)  National Association of Mutual	Insurance Companies PAC	
Full Name (Last, First, Middle Initial)  Kelly Ruud  Mailing Address 3030 N 3rd St		Date of Receipt
City Phoenix	State Zip Code AZ 85012-3074	11 19 2015  Transaction ID : A444E3E17D23D4F2DB95  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	12.00
Name of Employer  CopperPoint Mutual Insurance Company  Receipt For:  Primary General  Other (specify) ▼	Occupation  Manager of Financial Systems  Aggregate Year-to-Date ▼  226.56	
Full Name (Last, First, Middle Initial)  Mr. Francis R. Santoro  Mailing Address 2005 Market St		Date of Receipt
Ste 1200 City Philadelphia	State Zip Code PA 19103-7008	11 24 2015  Transaction ID : A209C340113944742BA7  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	12.50
Name of Employer Pennsylvania Lumbermens Mutual Insuran	Occupation Vice President, Claims	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  254.00	
Full Name (Last, First, Middle Initial)  C. Mr. Fred Schneider		Date of Receipt
Mailing Address 1 Preferred Way	_	11 09 2015
City New Berlin	State Zip Code NY 13411-1800	Transaction ID : A7E03E73E64C5460B9C8  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer Preferred Mutual Insurance Company	Occupation Director, Field Agency Marketing	
Receipt For:  Primary General  Other (specify)   Other	Aggregate Year-to-Date ▼  210.00	
SUBTOTAL of Receipts This Page (optional)		44.50
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 60 OF 88 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Fred Schneiderman Date of Receipt Mailing Address PO Box 5626 09 2015 11 City Zip Code State Transaction ID: AAAD7696BF3374E90957 Rockford IL 61125-0626 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation Director Personal Lines/Underwriting S Rockford Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Kenneth Schroeder Date of Receipt Mailing Address PO Box 30660 11 05 2015 City State Zip Code Transaction ID: ACCC3EF84FF0D4094BA4 MI Lansing 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 80.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Senior Vice President, Commercial Unde Receipt For: Aggregate Year-to-Date ▼ Primary General 580.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. James C. Schumacher Date of Receipt Mailing Address PO Box 30660 05 2015 City Zip Code State Transaction ID: A2429772430C444B38F4 MI Lansing 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 42.00 С federal political committee. Name of Employer Occupation Auto-Owners Insurance Company Director - Agency Systems Receipt For: Aggregate Year-to-Date ▼ Primary General 462.00 Other (specify) 152.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 61 OF 88 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Frederick Schunter Date of Receipt Mailing Address 1460 Wells St 03 2015 11 City Zip Code State Transaction ID: AA462538F0205494990A WA Enumclaw 98022-3003 Amount of Each Receipt this Period FEC ID number of contributing 41.67 federal political committee. Name of Employer Occupation Mutual of Enumclaw Insurance Company Director Receipt For: Aggregate Year-to-Date ▼ Primary General 400.02 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Kurt H. Seelbach CPA, CPCU Date of Receipt Mailing Address 550 Eisenhower Rd 11 09 2015 City State Zip Code Transaction ID: A58D99250E21E4701970 KS Leavenworth 66048-1190 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Armed Forces Insurance Exchange President & CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Paul Sells Date of Receipt Mailing Address 2005 Market St 24 2015 Ste 1200 City State Zip Code Transaction ID: A42A00C73C50B4D91A38 PΑ Philadelphia 19103-7008 Amount of Each Receipt this Period FEC ID number of contributing 12.00 С federal political committee. Name of Employer Occupation Pennsylvania Lumbermens Mutual Insuran Compensation Supervisor Receipt For: Aggregate Year-to-Date ▼ Primary General 430.00 Other (specify) 303.67 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... -9

FOR LINE NUMBER: PAGE 62 OF 88 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Ms. Phyllis Senseman LUTCF Date of Receipt Mailing Address 3030 N 3rd St 2015 11 19 City Zip Code State Transaction ID: A9B6D47FDB251495D925 Phoenix ΑZ 85012-3074 Amount of Each Receipt this Period FEC ID number of contributing 20.83 federal political committee. Name of Employer Occupation CopperPoint Mutual Insurance Company Vice President Marketing and Communica Receipt For: Aggregate Year-to-Date ▼ Primary General 437.43 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Kent B. Shantz Date of Receipt Mailing Address PO Box 5626 11 09 2015 City State Zip Code Transaction ID: A54A3969423B748F7AEC Rockford IL 61125-0626 Amount of Each Receipt this Period FEC ID number of contributing 115.50 federal political committee. Name of Employer Occupation Rockford Mutual Insurance Company COO Receipt For: Aggregate Year-to-Date ▼ Primary General 924.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. William D. Sheldon Date of Receipt Mailing Address 3030 N 3rd St 19 2015 City Zip Code State Transaction ID: AB7D56808552E4C5F808 ΑZ Phoenix 85012-3074 Amount of Each Receipt this Period FEC ID number of contributing C 41.67 federal political committee. Name of Employer Occupation General Counsel and Chief Compliance O CopperPoint Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 208.35 Other (specify) 178.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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	FOR LIN	E NUMBER	: PAGE	63 OF	88
Use separate schedule(s) for each category of the	(check or	nly one)	_		
Detailed Summary Page	<b>X</b> 11a	11b	11c	12	
	13	14	15	16	17

/	lational Association of Mutual	mourance companies PAC	T
	ull Name (Last, First, Middle Initial)  Mr. Jon Sisk		Date of Receipt
	ailing Address PO Box 6927		11 05 2015
Ci	ty	State Zip Code	Transaction ID : AC03F0801BB50408594
R	ichmond	VA 23230-0927	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C	20.84
Na	ame of Employer	Occupation	
М	utual Assurance Society of Virginia	Information Systems Manager	
R	eceipt For:	Aggregate Year-to-Date ▼	1
	Primary General  Other (specify) ▼	208.56	
3. <u>N</u>	ull Name (Last, First, Middle Initial) /r. Steven C. Sliver CPA		Date of Receipt
M	ailing Address PO Box 577		11 09 2015
Ci	ty	State Zip Code	Transaction ID : A950CC6D9AAE84D76A
Н	untingdon	PA 16652-0577	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C	625.00
	ame of Employer utual Benefit Insurance Company	Occupation CEO	
Re	eceipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  2500.00	
	ull Name (Last, First, Middle Initial) Mr. Donald A. Smith Jr.		Date of Receipt
_	ailing Address 3030 N 3rd St		11 19 2015
Ci	ty	State Zip Code	Transaction ID : AD43BDF872AC84D1DE
P	hoenix	AZ 85012-3074	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C	125.00
Na	ame of Employer	Occupation	
	opperPoint Mutual Insurance Company	President & CEO	
Re	eceipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	2305.00	
	PTOTAL of Descide This Desc (antique)		770.84

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NAME OF COMMITTEE (In Full)  National Association of Mutual	Insurance Companies PAC	
Full Name (Last, First, Middle Initial)  Mr. Byron Smith  Mailing Address PO Box 618  City Columbia  FEC ID number of contributing federal political committee.  Name of Employer Columbia Mutual Insurance Company Receipt For:  Primary General Other (specify)	State Zip Code MO 65205-0618  C  Occupation Vice President  Aggregate Year-to-Date ▼	Date of Receipt  11 12 2015  Transaction ID: ACF24DEB9B49447E9B91  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial)  Mr. Byron Smith  Mailing Address PO Box 618  City  Columbia  FEC ID number of contributing federal political committee.  Name of Employer  Columbia Mutual Insurance Company  Receipt For:  Primary General  Other (specify)	State Zip Code MO 65205-0618  C  Occupation Vice President  Aggregate Year-to-Date ▼  225.00	Date of Receipt  11 12 2015  Transaction ID: AAF994EBBC0A54261B39  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial)  Mr. John K. Smith CRM, CIC,  Mailing Address 2005 Market St Ste 1200  City Philadelphia  FEC ID number of contributing federal political committee.  Name of Employer  Pennsylvania Lumbermens Mutual Insuran  Receipt For:  Primary General Other (specify)	State Zip Code PA 19103-7008  C  Occupation President & CEO  Aggregate Year-to-Date ▼  2600.00	Date of Receipt  11 24 2015  Transaction ID: A2D56015303EC40B18C9  Amount of Each Receipt this Period  95.00
SUBTOTAL of Receipts This Page (optional)	<u> </u>	145.00
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not be sold or used by any person for the purpose of soliciting contributions							

	Statements may not be sold or used by any per- he name and address of any political committee to	
NAME OF COMMITTEE (In Full)  National Association of Mutua	I Insurance Companies PAC	
Full Name (Last, First, Middle Initial)  Mr. Norm Smith  Mailing Address 1460 Wells St  City Enumclaw	State Zip Code WA 98022-3003	Date of Receipt  11 03 2015  Transaction ID: AFA34EF2D0BAB4EC29F  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer  Mutual of Enumclaw Insurance Company  Receipt For:  □ Primary □ General □ Other (specify) ▼	Occupation Director  Aggregate Year-to-Date ▼  225.00	45.00
Full Name (Last, First, Middle Initial)  Mr. Steven C. Speicher  Mailing Address PO Box 30660  City  Lansing  FEC ID number of contributing federal political committee.  Name of Employer  Auto-Owners Insurance Company  Receipt For:  Primary  General  Other (specify)	State Zip Code MI 48909-8160  C  Occupation Regional Vice President - Forest Regio  Aggregate Year-to-Date ▼  550.00	Date of Receipt  11 05 2015  Transaction ID : ADA95D05DF1AB41EF86I  Amount of Each Receipt this Period  50.00
Full Name (Last, First, Middle Initial)  Ms. Kristen Spriggs  Mailing Address PO Box 68700  City Indianapolis  FEC ID number of contributing federal political committee.  Name of Employer  National Association of Mutual Insuran  Receipt For:  Primary General Other (specify)	State Zip Code IN 46268-0700  C  Occupation Vice President - Member Development  Aggregate Year-to-Date ▼  460.00	Date of Receipt  11 16 2015  Transaction ID : A4F5D79E7D11741A587E  Amount of Each Receipt this Period  20.00
SUBTOTAL of Receipts This Page (optional).	•	115.00
TOTAL This Period (last page this line number	er only)	

	FOR	LINE	NU	MBER	:	PAGE	. (	66 OF	=	88
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Name of committee (in Full)  National Association of Mutual	Insurance Companies PAC	
Full Name (Last, First, Middle Initial)  A. Mr. Robert G. Street AIM		Date of Receipt
Mailing Address 222 Ames St		1.1 13 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Dedham	State Zip Code MA 02026-1850	Transaction ID : AB46085C670C94863959  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer  Norfolk & Dedham Mutual Fire Insurance  Receipt For:  Primary General  Other (specify) ▼	Occupation  NE Casualty Claims Division Manager  Aggregate Year-to-Date ▼  480.00	
Full Name (Last, First, Middle Initial)  Mr. Edward Stuckrath  Mailing Address 6101 Anacapri Blvd	.55.60	Date of Receipt
City Lansing	State Zip Code MI 48917-3968	11 05 2015  Transaction ID : A6DBA5F3B96004B9DA8E  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer Auto-Owners Insurance Company	Occupation  Regional Vice President Westminister	20.83
Receipt For:  Primary General  Other (specify) ▼	Regional Vice President - Westminister  Aggregate Year-to-Date ▼  222.53	
Full Name (Last, First, Middle Initial)  Ms. Mary Ann Sturm  Mailing Address 3030 N 3rd St		Date of Receipt
City Phoenix	State Zip Code AZ 85012-3074	11 19 2015  Transaction ID : AAC419E70C9C14620927  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	12.50
Name of Employer  CopperPoint Mutual Insurance Company	Occupation AVP, Human Resources	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  229.06	
SUBTOTAL of Receipts This Page (optional)		53.33
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	FOF	R LINE	NU	IMBER	:	PAGE	. (	67 OF	=	88
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	d Statements may not be sold or used by any per the name and address of any political committee t	
NAME OF COMMITTEE (In Full)  National Association of Mutua	•	
Full Name (Last, First, Middle Initial)  Ms. Mary B. Sullivan CIC, AAI  Mailing Address 3601 Vincennes Rd		Date of Receipt  M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
City Indianapolis  FEC ID number of contributing federal political committee.  Name of Employer  NAMIC Insurance Company, Inc.  Receipt For:  Primary General  Other (specify)	State Zip Code IN 46268-1154  C  Occupation NIA Operations Manager  Aggregate Year-to-Date ▼  505.00	Transaction ID : AE038C7B6D2BB4FAEBD  Amount of Each Receipt this Period  10.00
Full Name (Last, First, Middle Initial)  Mr. Tim F. Sullivan RPLU  Mailing Address PO Box 68700  City Indianapolis  FEC ID number of contributing federal political committee.  Name of Employer NAMIC Insurance Company, Inc.  Receipt For:  Primary General Other (specify)	State Zip Code IN 46268-0700  C  Occupation President & CEO  Aggregate Year-to-Date ▼  2211.45	Date of Receipt  11 16 2015  Transaction ID: A62A0C1D7089F4DE6952  Amount of Each Receipt this Period  96.15
Full Name (Last, First, Middle Initial)  Mr. Terry Suttner  Mailing Address PO Box 68700  City Indianapolis  FEC ID number of contributing federal political committee.  Name of Employer  National Association of Mutual Insuran  Receipt For:  Primary General Other (specify)	State Zip Code IN 46268-0700  C  Occupation Vice President - Membership/Insurance  Aggregate Year-to-Date ▼  920.00	Date of Receipt  11 16 2015  Transaction ID: AB9A73C249AC54D34A13  Amount of Each Receipt this Period  40.00
SUBTOTAL of Receipts This Page (optional).	•	146.15
TOTAL This Period (last page this line number	er only)	

FOR LINE NUMBER: PAGE 68 OF 88 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Jeffrey Tagsold Date of Receipt Mailing Address PO Box 30660 05 2015 11 City Zip Code State Transaction ID: A4A95DAF40A2F4DCE92B Lansing MI 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** President Receipt For: Aggregate Year-to-Date ▼ Primary General 1100.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Mr. Paul Tetrault Date of Receipt Mailing Address PO Box 68700 11 16 2015 City State Zip Code Transaction ID: AB271396761234D519E8 IN Indianapolis 46268-0700 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Name of Employer Occupation National Association of Mutual Insuran State & Policy Affairs Counsel Receipt For: Aggregate Year-to-Date ▼ Primary General 460.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Daniel J. Thelen Date of Receipt Mailing Address PO Box 30660 05 2015 City Zip Code State Transaction ID: AA921DEC31BA84873940 MI Lansing 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 85.00 С federal political committee. Name of Employer Occupation Senior Vice President of Human Resourc Auto-Owners Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 855.00 Other (specify) 205.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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FOR LINE NUMBER: PAGE 69 OF 88 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Joe Thesing Date of Receipt Mailing Address PO Box 68700 2015 11 16 City Zip Code State Transaction ID: AE5609610B5694AC4864 Indianapolis IN 46268-0700 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation Vice President - State Affairs National Association of Mutual Insuran Receipt For: Aggregate Year-to-Date ▼ Primary General 920.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Gary W. Thompson CPCU, CIC Date of Receipt Mailing Address PO Box 618 11 12 2015 City State Zip Code Transaction ID: A8FC669E27B314B4A997 MO Columbia 65205-0618 Amount of Each Receipt this Period FEC ID number of contributing 200.00 federal political committee. Name of Employer Occupation Columbia Mutual Insurance Company President/CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 2600.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Randall Trinklein Date of Receipt Mailing Address 1 Mutual Ave 06 2015 City Zip Code State Transaction ID: A592A6A5E68E04EBD9DF MI Frankenmuth 48787-1000 Amount of Each Receipt this Period FEC ID number of contributing 39.00 С federal political committee. Name of Employer Occupation Vice President of Administration Frankenmuth Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 897.00 Other (specify) 279.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

	FOF	R LINE	NU	IMBER	:	PAGE	- 7	70 OF	88
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Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any perse name and address of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  National Association of Mutual	Insurance Companies PAC	
Full Name (Last, First, Middle Initial)  Mr. Randall Trinklein  Mailing Address 1 Mutual Ave  City Frankenmuth  FEC ID number of contributing federal political committee.  Name of Employer Frankenmuth Mutual Insurance Company Receipt For:  Primary General Other (specify)	State Zip Code MI 48787-1000  C  Occupation Vice President of Administration  Aggregate Year-to-Date   936.00	Date of Receipt  11 20 2015  Transaction ID: AEC72E328424C4E249F3  Amount of Each Receipt this Period  39.00
Full Name (Last, First, Middle Initial)  Mr. Michael Ulmer  Mailing Address PO Box 68700  City Indianapolis  FEC ID number of contributing federal political committee.  Name of Employer National Association of Mutual Insuran  Receipt For:  Primary General Other (specify)	State Zip Code IN 46268-0700  C  Occupation Vice President - Business Development  Aggregate Year-to-Date ▼  230.00	Date of Receipt  11 16 2015  Transaction ID : AE27B2709FF71445087D  Amount of Each Receipt this Period  10.00
Full Name (Last, First, Middle Initial)  Mr. Aaron J. Valentine  Mailing Address 1 Preferred Way  City New Berlin  FEC ID number of contributing federal political committee.  Name of Employer  Preferred Mutual Insurance Company  Receipt For:  Primary General Other (specify)	State Zip Code NY 13411-1800  C  Occupation Senior Vice President, Treasurer & CFO  Aggregate Year-to-Date ▼  1030.00	Date of Receipt  M M M / D D / 2015  Transaction ID : A5948B67B52074D6D960  Amount of Each Receipt this Period  100.00
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	149.00
TOTAL This Period (last page this line number	only)	

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	Statements may not be sold or used by any persthe name and address of any political committee to	
NAME OF COMMITTEE (In Full)  National Association of Mutua	I Insurance Companies PAC	
Full Name (Last, First, Middle Initial)  Ms. Kristie M. Walp  Mailing Address 1725 Hopley Ave  City  Bucyrus  FEC ID number of contributing federal political committee.  Name of Employer  United Ohio Insurance Company  Receipt For:  Primary  General  Other (specify)	State Zip Code OH 44820-3569  C  Occupation Farm Underwriting Manager  Aggregate Year-to-Date ▼  240.00	Date of Receipt  11 03 2015  Transaction ID: AD3836AA13CD34B9194A  Amount of Each Receipt this Period  10.00
Full Name (Last, First, Middle Initial)  Ms. Kristie M. Walp  Mailing Address 1725 Hopley Ave  City  Bucyrus  FEC ID number of contributing federal political committee.  Name of Employer United Ohio Insurance Company  Receipt For:  Primary General Other (specify)	State Zip Code OH 44820-3569  C  Occupation Farm Underwriting Manager  Aggregate Year-to-Date ▼  250.00	Date of Receipt  11 18 2015  Transaction ID : AEF23089176664B84B93  Amount of Each Receipt this Period  10.00
Full Name (Last, First, Middle Initial)  Mr. James J. Walsh Jr.  Mailing Address PO Box 30660  City Lansing  FEC ID number of contributing federal political committee.  Name of Employer  Auto-Owners Insurance Company  Receipt For:  Primary General Other (specify)	State Zip Code MI 48909-8160  C  Occupation Vice President-Claims  Aggregate Year-to-Date ▼  550.00	Date of Receipt  11 05 2015  Transaction ID: A0C59372BD0B844B6A44  Amount of Each Receipt this Period  50.00
SUBTOTAL of Receipts This Page (optional).	<u> </u>	70.00
TOTAL This Period (last page this line number	er only)	

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	Statements may not be sold or used by any pers he name and address of any political committee t	
NAME OF COMMITTEE (In Full)  National Association of Mutua	I Insurance Companies PAC	
Full Name (Last, First, Middle Initial)  Mr. Joseph Walsh CPCU, CIC,  Mailing Address PO Box 111  City  Bucyrus  FEC ID number of contributing federal political committee.  Name of Employer  Ohio Mutual Insurance Company  Receipt For:  Primary General  Other (specify)   Full Name (Last, First, Middle Initial)	State Zip Code OH 44820-0111  C  Occupation Manager - Business Insurance Products  Aggregate Year-to-Date ▼  240.00	Date of Receipt  11 03 2015  Transaction ID: A0A833031F16044B0A76  Amount of Each Receipt this Period  10.00
Mr. Joseph Walsh CPCU, CIC,  Mailing Address PO Box 111  City  Bucyrus  FEC ID number of contributing federal political committee.  Name of Employer Ohio Mutual Insurance Company  Receipt For:  Primary General Other (specify)	State Zip Code OH 44820-0111  C  Occupation Manager - Business Insurance Products  Aggregate Year-to-Date ▼  250.00	Date of Receipt  11 18 2015  Transaction ID: A4956F224EA0F422DBFB  Amount of Each Receipt this Period  10.00
Full Name (Last, First, Middle Initial)  Ms. Ann Ward  Mailing Address PO Box 68700  City Indianapolis  FEC ID number of contributing federal political committee.  Name of Employer  NAMIC Insurance Company, Inc.  Receipt For:  Primary General Other (specify)	State Zip Code IN 46268-0700  C  Occupation Senior Underwriter/Tax Specialist  Aggregate Year-to-Date ▼  230.00	Date of Receipt  11 16 2015  Transaction ID: A1B905072A89A48C0A42  Amount of Each Receipt this Period  10.00
SUBTOTAL of Receipts This Page (optional).	<b>&gt;</b>	30.00
TOTAL This Period (last page this line number	er only)	

## SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 73 OF 88 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Ian R. Ward Date of Receipt Mailing Address PO Box 30660 05 2015 11 City Zip Code State Transaction ID: A371754A4C3454E13BAB Lansing MI 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 84.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Senior Vice President, Investments and Receipt For: Aggregate Year-to-Date ▼ Primary General 812.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. David Weber Date of Receipt Mailing Address 500 S US Highway 77A 11 09 2015 City State Zip Code Transaction ID: ADDDDDF6F3B134BD6A44 TX Yoakum 77995-1399 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Hochheim Prairie Farm Mutual Insurance Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Chad Welborn Date of Receipt Mailing Address 3030 N 3rd St 19 2015 City State Zip Code Transaction ID: AEF028DD84790452D8C7 ΑZ Phoenix 85012-3074 Amount of Each Receipt this Period FEC ID number of contributing C 10.42 federal political committee. Name of Employer Occupation Chief Investment Officer CopperPoint Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 218.66 Other (specify) 344.42 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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## SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 74 OF 88 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Mark Wenger Date of Receipt Mailing Address PO Box 30660 05 2015 11 City Zip Code State Transaction ID: ABD8310E60F014E289E3 Lansing MI 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Assistant Vice President and Chief P&C Receipt For: Aggregate Year-to-Date ▼ Primary General 972.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Gordon E. Wickham Date of Receipt Mailing Address PO Box 30660 11 05 2015 City State Zip Code Transaction ID: A6A7A59072BD649E3923 MI Lansing 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 21.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** AVP-Information Systems & Technology Receipt For: Aggregate Year-to-Date ▼ Primary General 231.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Noel A. Williams Date of Receipt Mailing Address 3030 N 3rd St 19 2015 City Zip Code State Transaction ID: A55C5C76B44774C34B40 ΑZ Phoenix 85012-3074 Amount of Each Receipt this Period FEC ID number of contributing C 20.83 federal political committee. Name of Employer Occupation CopperPoint Mutual Insurance Company Vice President of Underwriting Receipt For: Aggregate Year-to-Date ▼ Primary General 437.43 Other (specify) 141.83 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any persone name and address of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  National Association of Mutual	Insurance Companies PAC	
Full Name (Last, First, Middle Initial)  Mr. Daniel Witt  Mailing Address 3030 N 3rd St  City Phoenix  FEC ID number of contributing federal political committee.  Name of Employer  CopperPoint Mutual Insurance Company  Receipt For:  Primary General Other (specify)	State Zip Code AZ 85012-3074  C  Occupation Claims Manager  Aggregate Year-to-Date ▼  446.00	Date of Receipt  11 19 2015  Transaction ID: A00F27855862B4A6E92E  Amount of Each Receipt this Period  22.00
Full Name (Last, First, Middle Initial)  Mr. William Woodbury  Mailing Address 6101 Anacapri Blvd  City  Lansing  FEC ID number of contributing federal political committee.  Name of Employer  Auto-Owners Insurance Company  Receipt For:  Primary  General  Other (specify)	State Zip Code MI 48917-3968  C  Occupation SVP, Secretary & General Counsel  Aggregate Year-to-Date ▼  1008.33	Date of Receipt  11 05 2015  Transaction ID: AD92BDFD8B8F44342877  Amount of Each Receipt this Period  91.67
Full Name (Last, First, Middle Initial)  Mr. Jeffrey S. Wrobel Sr.  Mailing Address PO Box 6927  City Richmond  FEC ID number of contributing federal political committee.  Name of Employer  Mutual Assurance Society of Virginia  Receipt For:  Primary General Other (specify)	State Zip Code VA 23230-0927  C  Occupation President  Aggregate Year-to-Date ▼  541.66	Date of Receipt  M M M / D D / 2015  Transaction ID : A67242756291048BF987  Amount of Each Receipt this Period  50.00
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	163.67
TOTAL This Period (last page this line numbe	r only)	

## SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

	FOR LINE NUMBER:	PAGE	76 OF	88
Use separate schedule(s)	(check only one)			
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	d Statements may not be sold or used by any pers the name and address of any political committee to	
NAME OF COMMITTEE (In Full)		
/ INational Association of Mutua	al Insurance Companies PAC	
Full Name (Last, First, Middle Initial)  Mr. Daniel Yesbeck		Date of Receipt
Mailing Address PO Box 5626		11 09 2015
City	State Zip Code	Transaction ID : A3CE27EE6D1F44ED5AAE
Rockford	IL 61125-0626	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	28.86
Name of Employer	Occupation	†
Rockford Mutual Insurance Company	Information Technology Manager	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General		
Other (specify) ▼	230.75	
Full Name (Last, First, Middle Initial)  3. Mr. Steve Zabriskie		Date of Receipt
Mailing Address PO Box 30660		11 05 2015
City	State Zip Code	Transaction ID : A212F5A27B6BE404FAA3
Lansing	MI 48909-8160	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	22.00
Name of Employer	Occupation	1
Auto-Owners Insurance Company	Assistant Vice President-Sales	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	242.00	
Full Name (Last, First, Middle Initial)		Date of Receipt
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Name of Employer	Occupation	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)	)	50.86
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TOTAL This Period (last page this line numb	per only)	10982.40

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 77 OF 88 (check only one)  11a 11b X 11c 12 13 14 15 16 17
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  National Association of Mutual  Full Name (Last, First, Middle Initial)  CNA FINANCIAL CORPORATION Companies and Sories and Sorie	e name and a	e Companies PAC OR GOOD GOVERNMENT Zip Code	
CHICAGO  FEC ID number of contributing federal political committee.  Name of Employer  Receipt For:  □ Primary □ General □ Other (specify) ▼	C C0	60604 0078287 Year-to-Date ▼ 5000.00	Amount of Each Receipt this Period  5000.00
Full Name (Last, First, Middle Initial)  B. Nationwide Mutual Insurance Comp  Mailing Address One Nationwide Plaza  1-32-301  City  Columbus  FEC ID number of contributing federal political committee.  Name of Employer  Receipt For:  Primary  General  Other (specify)	State OH C COO	Zip Code 43215 0076174	Date of Receipt  11 09 2015  Transaction ID: A0DB49C50E0854D0D978  Amount of Each Receipt this Period  2500.00
Full Name (Last, First, Middle Initial)  C.  Mailing Address  City  FEC ID number of contributing federal political committee.  Name of Employer  Receipt For:  Primary  Other (specify)   Other (specify)	State  C Occupation  Aggregate	Zip Code  Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y  Amount of Each Receipt this Period
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7500.00

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$\setminus$	NAME OF COMMITTEE (In Full)			
	National Association of Mutual I	nsurance	e Companies PAC	
Α.	Full Name (Last, First, Middle Initial) NAMIC Administrative Fund			Date of Receipt
	Mailing Address 3601 Vincennes Rd			M = M / D = D / Y = Y = Y
	City	State	Zip Code	11 20 2015 Transaction ID : AA37B738D8D8644A8A35
	Indianapolis	IN	46268-1154	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		438.63
	Name of Employer	Occupation		Reimb. of Bank Fees
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		2206.50	
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	FEC ID number of contributing federal political committee.	С		Amount of Each neceipt this Period
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	National Association of Mutua	l Insurance	e Companies PAC											
Δ.	Full Name (Last, First, Middle Initial) Chase Bank				Date o	f Racai	nt							
Λ.	Mailing Address 8751 Michigan Rd				M = M		) <b> </b> [	7	V V	Y	Y			
					11		30			015				
	City	State	Zip Code		Trans	saction	ID :	A4097	40007	72FF4	50BA47			
	Indianapolis	IN	46268-3141		Amoun	t of Ea	ch F	Receipt	this F	Period				
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	Primary General	Aggregate	Year-to-Date ▼	_										
	Other (specify) ▼	L	42.80	4										
В.	Full Name (Last, First, Middle Initial) Chase Bank				Date o	f Recei	pt							
	Mailing Address 8751 Michigan Rd				M = M / D = D / Y = Y = Y									
	Sity State Zip Code				11 30 2015 Transaction ID : A09B03B28D6B849A59A						40 A FO A (			
	Indianapolis	IN	46268-3141	Amount of Each Receipt th										
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	federal political committee.					7	-	7	_					
	Name of Employer	Occupation	1	"	nterest									
	Receipt For:	Aggregate	Year-to-Date ▼											
	Primary General	33 13		7										
	Other (specify) ▼		42.80	4										
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	City	State	Zip Code		_									
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	FEC ID number of contributing federal political committee.				,	_	,							
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	Receipt For:	Aggregate	Year-to-Date ▼											
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٦	NIDTOTAL of December Title Day of the Co.	1					-		-	. 3	.61			
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TOTAL This Period (last page this line number only).....

Mailing Address PO Box 981540  City State Zip Code TX 79998-1540  Purpose of Disbursement Credit Card Processing Fee  Candidate Name  Category/ Type  Office Sought: House Primary General Credit Card Processing Fee  Full Name (Last, First, Middle Initial)  B. American Express  Mailing Address PO Box 981540  City State Zip Code TX 79998-1540  Category/ Type  Office Sought: House Disbursement Credit Card Processing Fee Candidate Name  Office Sought: House Disbursement For:  Senate Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial)	2015 23458446B6BC0
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such of NAME OF COMMITTEE (In Full)  National Association of Mutual Insurance Companies PAC  Full Name (Last, First, Middle Initial)  A. American Express  Mailing Address PO Box 981540  City State Zip Code ITX 79998-1540  Purpose of Disbursement Credit Card Processing Fee  Candidate Name  Office Sought: House Primary General President State: District:  Full Name (Last, First, Middle Initial)  B. American Express  Mailing Address PO Box 981540  City State Zip Code Category/Type  Other (specify) ▼  Date of Disbursement Amount of Each Disbursement For: Senate Primary General President State: District:  Full Name (Last, First, Middle Initial)  B. American Express  Mailing Address PO Box 981540  City State Zip Code TX 79998-1540  Transaction ID : B6BA6352  Amount of Each Disbursement Category/Type  Office Sought: House Disbursement For: General Primary General Other (specify) ▼  Category/Type  Office Sought: House Disbursement For: General Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)	2015 23458446B6BC0 at this Period
NAME OF COMMITTEE (In Full)  National Association of Mutual Insurance Companies PAC  Full Name (Last, First, Middle Initial)  A. American Express  Mailing Address PO Box 981540  City State Zip Code TX 79998-1540  Purpose of Disbursement Credit Card Processing Fee Candidate Name  Office Sought: President Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial)  B. American Express  Mailing Address PO Box 981540  City State Zip Code TX 79998-1540  Primary General Other (specify) ▼  Date of Disbursement  Amount of Each Disbursement  Other (specify) ▼  Transaction ID: BFB8C51E  Amount of Each Disbursement  Date of Disbursement  Transaction ID: BFB8C51E  Amount of Each Disbursement  Category/ Type  Transaction ID: B6BA6352  Transaction ID: B6BA6352  Amount of Each Disbursement  Credit Card Processing Fee  Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  District:  Full Name (Last, First, Middle Initial)	2015 23458446B6BC0 at this Period
A. American Express  Mailing Address PO Box 981540  City State Zip Code El Paso TX 79998-1540  Purpose of Disbursement Credit Card Processing Fee  Candidate Name  Category/ Type  Office Sought: House Primary General Primary General Other (specify) ▼  B. American Express  Mailing Address PO Box 981540  City State Zip Code Primary General Other (specify) ▼  City State Zip Code El Paso TX 79998-1540  Purpose of Disbursement Credit Card Processing Fee Candidate Name  Category/ Type  Office Sought: House Primary General Other (specify) ▼  Category/ Type  Office Sought: House Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial)	2015 3458446B6BC0 at this Period
Mailing Address PO Box 981540  City State Zip Code TX 79998-1540  Purpose of Disbursement Credit Card Processing Fee  Candidate Name  Category/ Type  Office Sought: House Primary General Credit Card Processing Fee  Full Name (Last, First, Middle Initial)  B. American Express  Mailing Address PO Box 981540  City State Zip Code TX 79998-1540  Category/ Type  Office Sought: House Disbursement Credit Card Processing Fee Candidate Name  Office Sought: House Disbursement For:  Senate Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial)	2015 3458446B6BC0 at this Period
Mailing Address PO Box 981540  City	2015 3458446B6BC0 at this Period
El Paso TX 79998-1540  Purpose of Disbursement Credit Card Processing Fee  Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  District: Full Name (Last, First, Middle Initial)  B. American Express  Mailing Address PO Box 981540  City State Zip Code TX 79998-1540  Purpose of Disbursement Credit Card Processing Fee  Candidate Name  Category/ Type  Date of Disbursement  Transaction ID: BFB8C51C  Amount of Each Disbursement  Date of Disbursement  Transaction ID: BFB8C51C  Amount of Each Disbursement  Category/ Type  Transaction ID: BFB8C51C  Amount of Each Disbursement  Category/ Type  Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial)	nt this Period
Purpose of Disbursement Credit Card Processing Fee  Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify) ▼  Date of Disbursement  Full Name (Last, First, Middle Initial)  B. American Express  Mailing Address PO Box 981540  City State Zip Code El Paso TX 79998-1540  Purpose of Disbursement Credit Card Processing Fee  Candidate Name  Category/ Type  Transaction ID: B6BA6352  Amount of Each Disbursement  Category/ Type  Office Sought: House Disbursement For: Senate Primary General  Category/ Type  Office Sought: House Disbursement For: Senate Primary General  Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial)	nt this Period
Credit Card Processing Fee Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial)  B. American Express  Mailing Address PO Box 981540  City State Zip Code El Paso TX 79998-1540  Purpose of Disbursement Credit Card Processing Fee  Candidate Name  Category/ Type  Transaction ID: B6BA6352  Amount of Each Disbursement  Category/ Type  Office Sought: House Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial)	
Office Sought: House Senate Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial)  B. American Express  Mailing Address PO Box 981540  City State Zip Code TX 79998-1540  Purpose of Disbursement Credit Card Processing Fee  Candidate Name  Office Sought: House Primary General Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial)	7.95
Office Sought: House Senate Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial)  B. American Express  Mailing Address PO Box 981540  City State Zip Code TX 79998-1540  Purpose of Disbursement Credit Card Processing Fee  Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial)	7.95
Senate Primary General Other (specify) ▼  Date of Disbursement  City EI Paso Purpose of Disbursement Credit Card Processing Fee  Candidate Name  Office Sought: House Senate Primary Other (specify) ▼  Date of Disbursement  Transaction ID: B6BA6352  Amount of Each Disbursement Category/ Type  Office Sought:  Full Name (Last, First, Middle Initial)	
Full Name (Last, First, Middle Initial)  B. American Express  Mailing Address PO Box 981540  City State Zip Code El Paso TX 79998-1540  Purpose of Disbursement Credit Card Processing Fee  Candidate Name  Category/ Type  Office Sought: House Disbursement For: Senate Primary General Primary General Other (specify)  State: District:  Full Name (Last, First, Middle Initial)	
B. American Express  Mailing Address PO Box 981540  City State Zip Code TX 79998-1540  Purpose of Disbursement Credit Card Processing Fee  Candidate Name  Category/ Type  Office Sought: House Primary General President Other (specify) ▼  State: District:  Date of Disbursement  Transaction ID: B6BA6352  Amount of Each Disbursement  Category/ Type  Other (specify) ▼  State: Full Name (Last, First, Middle Initial)	
Mailing Address PO Box 981540  City State Zip Code TX 79998-1540  Purpose of Disbursement Credit Card Processing Fee  Candidate Name  Category/ Type  Office Sought: House Primary General President Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial)	
Mailing Address PO Box 981540  City State Zip Code EI Paso TX 79998-1540  Purpose of Disbursement Credit Card Processing Fee  Candidate Name  Category/ Type  Office Sought: House Disbursement For: Senate Primary General Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial)	
El Paso Purpose of Disbursement Credit Card Processing Fee  Candidate Name  Category/ Type  Office Sought: House Primary General President Other (specify)  State: District:  Full Name (Last, First, Middle Initial)	2015
El Paso Purpose of Disbursement Credit Card Processing Fee  Candidate Name  Category/ Type  Office Sought:  House Primary President State:  District:  Full Name (Last, First, Middle Initial)  TX 79998-1540  Amount of Each Disbursement Category/ Type  Amount of Each Disbursement Other (specify)  Type	22FF44CC1BD
Credit Card Processing Fee  Candidate Name  Category/ Type  Office Sought: House Senate Primary General President Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial)	221 24400100
Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial)	t this Period
Senate President Other (specify)  State:  District:  Full Name (Last, First, Middle Initial)  Primary Other (specify)  ▼	28.44
	2015
City State Zip Code Washington DC 20003-1164 Transaction ID : BE067E51	FFD444B118BE
Purpose of Disbursement Credit Card Processing Fee	
Candidate Name  Category/ Type  Amount of Each Disbursemer	12.50
Office Sought:  House Senate Primary President  State:  Disbursement For:  Other (specify) ▼  Other (specify) ▼	
SUBTOTAL of Disbursements This Page (optional)  TOTAL This Period (last page this line number only)	

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SCHEDULE B (FEC Form 3X)						PAGE	GE 81 OF 8				
ITEMIZED DISBURSEMENTS	Use separate sche for each category		e(s) (check only one)								
	Detailed Summary		X 21		23		24	25	26		
Γ			27		28b		28c	29	30b		
Any information copied from such Reports and Staten or for commercial purposes, other than using the name											
NAME OF COMMITTEE (In Full)											
National Association of Mutual Insu	ırance Compa	nies P	4C								
Full Name (Last, First, Middle Initial)											
A. Aristotle International, Inc.				Date	of Disburs	ement		Y Y	Υ		
Mailing Address 205 Pennsylvania Ave SE				11		20	L	2015			
•	State Zip Cod			Tran	saction II	) · B0:	31801A	594534	A30B53		
Washington	DC 20003-	1164				. 50	010017	00-100-1	ДООВОО		
Purpose of Disbursement Credit Card Processing Fee				Amou	nt of Each	n Disb	urseme	nt this f	Period		
Candidate Name			Category/ Type				7	9	0.38		
Office Sought: House Disburser Senate		eneral									
President State: District:	Other (specify) ▼										
Full Name (Last, First, Middle Initial)  B. Chase Bank				Date	of Disburs	ement	+				
D. Chase Dank				M				Y	V		
Mailing Address 8751 Michigan Rd				11		02		2015	Ť		
City	State Zip Cod	de		<b>T</b>		D D4	74 0000	40050	440400		
Indianapolis	IN 46268-	3141		Irar	saction I	D : B4	/1B889	4BCED	4184986		
Purpose of Disbursement Credit Card Processing Fee				Amou	nt of Each	n Disb	urseme	nt this f	Period		
Candidate Name			Category/ Type	ΉГ.			40.1	477	7.18		
Office Sought: House Disbursen	nent For:		.,,,,,	-	,						
Senate	Primary Ge	eneral									
President	Other (specify) ▼										
State: District:											
Full Name (Last, First, Middle Initial)  C.				Date	of Disburs	ement	t				
				M	M / D	D .	/ Y	YY	Υ		
Mailing Address						_	L				
City	State Zip Coo	de									
Purpose of Disbursement		ī									
Candidate Name		Category/ Type	Amou	nt of Each	n Disb	urseme	nt this F	Period			
Office Sought: House Disburser	nent For:		.,,,,		7	_	7				
		eneral									
President	Other (specify) ▼										
State: District:											
SUBTOTAL of Disbursements This Page (optional)								486	.56		
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TOTAL This Period (last page this line number only)					7			535	.45		

SCHEDULE B (FEC Form 3X)	Has account to 1.1.1.1	FOR LINE		PAGE 82 OF 88
ITEMIZED DISBURSEMENTS	Use separate schedule( for each category of the	(orlook orli)		
	Detailed Summary Page		22 X 23 28b	24 25 26 28c 29 30b
Any information copied from such Reports and Sta	tomonte may not be cold or			
or for commercial purposes, other than using the r				
NAME OF COMMITTEE (In Full)				
$ \; angle$ National Association of Mutual In	surance Companies	PAC		
V	<u>'</u>			
Full Name (Last, First, Middle Initial)			Date of Disburseme	ant.
A. Ann Wagner for Congress				
Mailing Address P.O. Box 50			11 / 17	2015
City Ballwin	State Zip Code MO 63022-0050		Transaction ID : E	316A846F053154C47A67
Purpose of Disbursement	MO 63022-0050			
Political Contribution			Amount of Each Dis	sbursement this Period
Candidate Name		Category/		4000.00
Rep. Ann L. Wagner		Туре		1000.00
	sement For: 2016			
Senate   President	✓ Primary General Other (specify) ▼			
State: MO District: 02	Other (specify)			
Full Name (Last, First, Middle Initial)				
B. Boozman for Arkansas			Date of Disburseme	ent
			M = M / D = D	/ Y = Y = Y = Y
Mailing Address P.O. Box 671			11 17	2015
City	State Zip Code		Transaction ID . E	2222724857044050026
Rogers	AR 72757-0671		Transaction ID:	3223D72ABE78A4850836
Purpose of Disbursement Political Contribution			Amount of Each Die	sbursement this Period
Candidate Name			Amount of Lacif Dis	sparsement this renou
Sen. John N. Boozman		Category/ Type		1500.00
Office Sought: House Disburs	sement For: 2016	71		
	Y Primary General			
President	Other (specify) ▼			
State: AR District:				
Full Name (Last, First, Middle Initial)  C. Bucshon for Congress			Date of Disburseme	ent
Ducsilon for Congress			M M / D D	/
Mailing Address PO Box 250			11 02	2015
City	Ctoto 7:- O1-			<del></del>
City Newburgh	State Zip Code IN 47629		Transaction ID : E	3DFFB13EBF91B45E9966
Purpose of Disbursement				
Political Contribution			Amount of Each Dis	sbursement this Period
Candidate Name		Category/		1000.00
Rep. Larry D. Bucshon  Office Sought:	sement For: 2016	Туре		1000.00
Senate Disbur	Sement For: 2016  Primary General			
President	Other (specify)			
State: IN District: 08				
SUBTOTAL of Disbursements This Page (optional	l)			3500.00
TOTAL This Deviced (last name this line name)	alu)			
TOTAL This Period (last page this line number or	шу <i>)</i>		1 20 2	

SCHEDULE B (FEC Form 3X)	Han any service of the Control of th	FOR LINE NUMBER:				
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	(oricon oriny				
	Detailed Summary Page	21b	22 X 23 28b	24 25 26 28c 29 30b		
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or for commercial purposes, other than using the nar						
NAME OF COMMITTEE (In Full)						
$ \; angle$ National Association of Mutual Ins	urance Companies	PAC				
Full Name (Last, First, Middle Initial)						
A. Building America's Republican Re	presentation PAC		Date of Disbursemen	ıt		
Mailing Address 332 W. Lee Hwy #303			11 17	2015		
City Warrenton	State Zip Code VA 20186-2428		Transaction ID : BA	A14432F5F3C24B5B97A		
Purpose of Disbursement	201002120					
Political Contribution			Amount of Each Disk	oursement this Period		
Candidate Name		Category/ Type		5000.00		
Office Sought: House Disburse	ment For: 2015	Турс				
Senate	Primary General					
State: District:	Other (specify) ▼ Other2015	;				
Full Name (Last, First, Middle Initial)						
B. Clay Jr. for Congress			Date of Disbursemen	ıt		
Mailing Address P.O. Box 4544			M M / D D D 17	2015		
Mailing Address P.O. Box 4544			11 17	2015		
•	State Zip Code		Transaction ID : B2	2843569D1EA84AB9A39		
Saint Louis Purpose of Disbursement	MO 63108-0544					
Political Contribution			Amount of Each Disk	oursement this Period		
Candidate Name		Category/		500.00		
Rep. Lacy Clay Jr.  Office Sought:  House Disburse	ment For: 2016	Туре				
	Primary General					
President	Other (specify) ▼					
State: MO District: 01  Full Name (Last, First, Middle Initial)						
C. Devin Nunes Campaign Committe	e		Date of Disbursemen	nt		
			M = M / D = D	/ Y = Y = Y = Y		
Mailing Address P.O. Box 6545			11 02	2015		
City	State Zip Code		Transaction ID · R1	14A5CCF721C74265823		
Visalia	CA 93290-6545		Transaction ib . B	14/1001 / 210/ 4200020		
Political Contribution	Purpose of Disbursement Political Contribution					
Candidate Name						
Rep. Devin G. Nunes  Office Sought: House Disburse	ment For: 2016	Туре		2500.00		
Office Sought: House Disburse Senate	Primary General					
President	Other (specify) ▼					
State: CA District: 22						
SUPTOTAL of Dishuranmenta This Days (anticard)				8000.00		
SUBTOTAL of Disbursements This Page (optional)		·····	4	4		
TOTAL This Period (last page this line number only	)					

SCHEDULE B (FEC Form 3X)	110-1-1-1	FOR LINE				
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the Detailed Summary Page	) (check only 21b 27	one)  22 X 23 24 25 26 28a 28b 28c 29 30b			
Any information copied from such Reports and Stater or for commercial purposes, other than using the name						
NAME OF COMMITTEE (In Full)						
National Association of Mutual Inst	urance Companies	PAC				
Full Name (Last, First, Middle Initial)						
A. Duffy for Congress	Duffy for Congress					
Mailing Address P.O. Box 538			11 17 2015			
City	State Zip Code		Transaction ID : BA30B6ADA5B5843FD899			
Wausau	WI 54402-0538		Transaction ib . BASOBOADASBS0451 D05.			
Purpose of Disbursement Political Contribution			Amount of Each Disbursement this Period			
Candidate Name		Category/	1000.00			
Rep. Sean P. Duffy Office Sought: House Disburser	ment For: 2016	Туре	7			
	Primary General Other (specify) ▼					
State: WI District: 07						
Full Name (Last, First, Middle Initial)			5			
B. Friends of Bill Posey			Date of Disbursement			
Mailing Address P.O. Box 360877			11 02 2015			
City Melbourne	State Zip Code FL 32936-0877		Transaction ID : B512A436E82ED48D3A9D			
Purpose of Disbursement Political Contribution	02000 0077		Amount of Each Disbursement this Period			
Candidate Name			Amount of Each dispursement this Period			
Rep. Bill Posey		Category/ Type	1000.00			
Office Sought: House Disburser	ment For: 2016 Primary General Other (specify)	77.				
Full Name (Last, First, Middle Initial)  C. Friends of Erik Paulsen	•					
Mailing Address PO Box 44369 250 Prairie Center Drive	•					
	State Zip Code					
Eden Prairie	MN 55344		Transaction ID : BF40BA58CD33F4113B60			
Purpose of Disbursement Political Contribution						
Candidate Name			Amount of Each Disbursement this Period			
Rep. Erik Paulsen		Category/ Type	2500.00			
Office Sought:    House   Disburser	, ,,					
State: MN District: 03						
SUBTOTAL of Disbursements This Page (optional)		·····•	4500.00			
TOTAL This Period (last page this line number only)	)					

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 85 OF		PAGE 85 OF 88
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one) 22 X 23 28a 28b	24 25 26 28c 29 30b
Any information copied from such Reports and Stater or for commercial purposes, other than using the nan				
NAME OF COMMITTEE (In Full)	•			
National Association of Mutual Insu	ırance Companies F	PAC		
Full Name (Last, First, Middle Initial)				
A. Heartland Values PAC			Date of Disburseme	
Mailing Address P.O. Box 505			11 17	2015
,	State Zip Code		Transaction ID · B	FA9DDB8BCBAE4111B4
Sioux Falls Purpose of Disbursement	SD 57101-0505			
Political Contribution			Amount of Each Dis	sbursement this Period
Candidate Name		Category/		2500.00
Office Cought House Dishurse	and Fam. 2045	Type	7	2300.00
Office Sought: House Disburser Senate	nent For: 2015 Primary General			
President	Other (specify) ▼			
State: District:	Other2015			
Full Name (Last, First, Middle Initial)			D (D) .	
B. Hoeven for Senate			Date of Disburseme	
Mailing Address P.O. Box 861			11 17	2015
City Sismarck Purpose of Disbursement	State Zip Code ND 58502-0861		Transaction ID : E	BEAD8225841734D358AE
Political Contribution			Amount of Each Dis	sbursement this Period
Candidate Name		Category/		
Sen. John H. Hoeven III		Type		1000.00
	nent For: 2016  Primary General  Other (specify)			
State: ND District:	other (specify)			
Full Name (Last, First, Middle Initial)			Date of Disburseme	
C. Hoosiers Victory Fund			M M / D D	/ Y Y Y Y
Mailing Address 324 S. Milledge Ave. Suite 101			11 17	2015
City Sthens	State Zip Code GA 30605-1048		Transaction ID : E	31EDEBDB9FC44A1D9B
Purpose of Disbursement Political Contribution				
Candidate Name		Category/ Type	Amount of Each Dis	sbursement this Period 2500.00
Office Sought: House Disburser	nent For: 2015	1,700		
Senate	Primary General			
President	Other (specify) ▼			
State: District:	Other2015			
SUBTOTAL of Disbursements This Page (optional)		······•		6000.00
TOTAL This Period (last page this line number only)				

SCHEDULE B (FEC Form 3X)				PAGE 86 OF 88
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	) (check only	v one)	24 25 26
	Detailed Summary Page	27	28a 28b	28c 29 30b
Any information copied from such Reports and State				
or for commercial purposes, other than using the na  NAME OF COMMITTEE (In Full)	ime and address of any polit	icai committee to	solicit contributions fro	m such committee.
National Association of Mutual Ins	surance Companies	PAC		
Full Name (Last, First, Middle Initial)				
A. Jason Smith for Congress			Date of Disburseme	nt
Mailing Address P.O. Box 1324		11 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City	State Zip Code		Transaction ID . P	DEE550DD70464DD4047
Cape Girardeau Purpose of Disbursement	MO 63702-1324		Transaction iD . B	BFE558DD79464BD4947
Political Contribution			Amount of Each Dis	bursement this Period
Candidate Name		Category/		1000.00
Rep. Jason T. Smith		Type	7	1000.00
Office Sought: House Disburs Senate President	ement For: 2016 Primary General Other (specify) ▼			
State: MO District: 08				
Full Name (Last, First, Middle Initial)			Data of Dialaman	
B. Peter Norbeck Leadership Fund			Date of Disburseme	
Mailing Address P.O. Box 477			11 02	2015
City	State Zip Code		Transaction ID : B	6DBC634276E948908A8
Pierre Purpose of Disbursement	SD 57501-0477			
Political Contribution			Amount of Each Dis	bursement this Period
Candidate Name		Category/ Type	, ,	2500.00
Senate	ement For: 2015  Primary General  Other (specify)   Other2015			
Full Name (Last, First, Middle Initial)	Otherzoro			
C. Project West PAC			Date of Disburseme	nt
Mailing Address 9227 East Lincoln Ave., #200-438	5		11 17	2015
City	State Zip Code		Transaction ID · B	E3F1B75D2BC9441EAA
Lone Tree Purpose of Disbursement	CO 80124-5506		i i ali sactivii ID . B	LU: 10/302003441EAA.
Political Contribution			Amount of Each Dis	bursement this Period
Candidate Name		Category/ Type	Amount of Lacif bis	1000.00
Office Sought:  Senate  President  State:  Disburse	ement For: 2015 Primary General Other (specify)  Other2015			
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SUBTOTAL of Disbursements This Page (optional)				4500.00
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SCHEDULE B (FEC Form 3X)	Lies conserve cale duis (a)   TOTT EINE NOMBETT.			87 OF 88
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	22 X 23 24 28c 28c	25 26 29 30b
Any information copied from such Reports and State or for commercial purposes, other than using the nar	ments may not be sold or use ne and address of any politic	ed by any perso al committee to	on for the purpose of soliciting con solicit contributions from such co	ntributions mmittee.
NAME OF COMMITTEE (In Full)	,,			
National Association of Mutual Ins	urance Companies F	PAC		
Full Name (Last, First, Middle Initial)				
A. Rob Woodall for Congress			Date of Disbursement	
Mailing Address P.O. Box 1871				15
	State Zip Code		Transaction ID : BE78325940	FF84915971
Lawrenceville Purpose of Disbursement	GA 30046-1871		Transaction 15 1 521 66266 16	. 201010011
Political Contribution			Amount of Each Disbursement	this Period
Candidate Name		Category/		0500.00
Rep. Rob Woodall III		Type		2500.00
Office Sought: House Disburse Senate President	ment For: 2016 Primary General Other (specify) ▼			
State: GA District: 07				
Full Name (Last, First, Middle Initial)  B. Roger Williams for U.S. Congress	Committee		Date of Disbursement	
Mailing Address P.O. Box 91061				015
Austin	State         Zip Code           TX         78709-1061		Transaction ID : B34C16DF2	77A84CEBAC
Purpose of Disbursement Political Contribution			Amount of Each Disbursement	this Period
Candidate Name		Category/		2500.00
Rep. Roger Williams		Type		2500.00
	ment For: 2016 Primary General Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
C. Texans for Henry Cuellar Congres	sional Campaign		Date of Disbursement	YY
Mailing Address 1519 Washington Street Suite 200			11 02 20	15
Laredo	State         Zip Code           TX         78040-4412		Transaction ID : B100A11013	372243279A5
Purpose of Disbursement Political Contribution				
Candidate Name		0-1	Amount of Each Disbursement	this Period
Rep. Henry R. Cuellar		Category/ Type		1000.00
Senate President	ment For: 2016 Primary General Other (specify)			
State: TX District: 28				
SUBTOTAL of Disbursements This Page (optional)		<u> </u>		6000.00
TOTAL This Period (last page this line number only	)			

SCHEDULE B (FEC Form 3X)	Lies congrete cohodule(s) TOR LINE NOWIDER.			PAGE 88 OF 88	
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(orleast orliny	•		
	Detailed Summary Page	21b 27	22 X 23 28b	24 25 26 28c 29 30b	
Any information copied from such Reports and Staten	nents may not be sold or u	sed by any perso	on for the purpose of	soliciting contributions	
or for commercial purposes, other than using the name					
NAME OF COMMITTEE (In Full)		DAO			
National Association of Mutual Insu	irance Companies	PAC			
Full Name (Last, First, Middle Initial)					
A. Walberg for Congress			Date of Disburseme		
Mailing Address P.O. Box 1362			11 10	2015	
,	State Zip Code		Transaction ID · F	3437BD0188F4D4FEDB18	
Jackson Purpose of Disbursement	MI 49204-1362		Transaction is . I	3407 BB01001 4B41 EBB10	
Political Contribution			Amount of Each Di	sbursement this Period	
Candidate Name		Category/		1000.00	
Rep. Tim L. Walberg		Туре		1000.00	
	nent For: 2016 Primary General				
President	Other (specify)				
State: MI District: 07					
Full Name (Last, First, Middle Initial)					
B. WALKER 4 NC			Date of Disburseme		
Mailing Address P.O. BOX 99247			11 02	2015	
			.1 02	2010	
,	State Zip Code		Transaction ID : I	3183F895351304DD0BF1	
Raleigh Purpose of Disbursement	NC 27624-9247				
Political Contribution			Amount of Each Di	sbursement this Period	
Candidate Name		Category/		1000.00	
Rep. Mark Walker	and Fran	Type		1000.00	
	nent For: 2016 Primary General				
	Other (specify)				
State: NC District: 06	V1 37 ¥				
Full Name (Last, First, Middle Initial)			D		
C.			Date of Disburseme		
Mailing Address			M M / D D	/	
	<u> </u>				
City	State Zip Code				
Purpose of Disbursement					
One Palata Name			Amount of Each Di	sbursement this Period	
Candidate Name		Category/			
Office Sought: House Disbursen	nent For:	Type	-	, , , , , ,	
	Primary General				
	Other (specify) ▼				
State: District:					
CURTOTAL of Dicharasanta This Days (and a				2000.00	
SUBTOTAL of Disbursements This Page (optional)		······			
TOTAL This Period (last page this line number only)				34500.00	